

CARL H. BRADLEY
SECRETARY



rec'd
FEB 01 1989
WALLACE G. WILKINSON
GOVERNOR

34511

COMMONWEALTH OF KENTUCKY
NATURAL RESOURCES AND ENVIRONMENTAL PROTECTION CABINET
DEPARTMENT FOR ENVIRONMENTAL PROTECTION
FRANKFORT OFFICE PARK
18 REILLY ROAD
FRANKFORT, KENTUCKY 40601

January 20, 1989

Mr. Scott Gardner
EPA CERCLA PA/SI Regional Project Officer
U.S. Environmental Protection Agency
345 Courtland Street, N.E.
Atlanta, Georgia 30365

RE: Preliminary Assessment Report (2)
Mobile Waste Control of Kentucky
Louisville, Kentucky
EPA ID# KYD 980-557-078

Dear Mr. Gardner:

Please find enclosed the Preliminary Assessment Report for Mobile Waste Control of Kentucky in Jefferson County. Based on this report, the following conclusions are made:

1. The landfill has received an undeterminable amount of waste material. There have been no known unauthorized disposals at this site.
2. The area in question has been incorporated into a larger landfill operation by the Kentucky Division of Waste Management. They have installed monitoring wells and conducted further groundwater sampling to ensure environmental safety, all of which is under the authority of the Kentucky Division of Waste Management.
3. There are no known groundwater users within a four mile radius of the site. The geology of the area should restrict contaminants from reaching the groundwater.

Mr. Scott Gardner
Page Two
January 20, 1989

As a result of this report, it is recommended that no further remedial action be planned under CERCLA.

Sincerely,

A handwritten signature in black ink, appearing to read "Carl Millanti". The signature is fluid and cursive, with a large initial "C" and a distinct "M".

Carl Millanti, Manager
Uncontrolled Sites Branch

CM/RK/lc

Enclosure

cc: Robert Keiser
Louisville Field Office
Central File

PRELIMINARY ASSESSMENT REPORT (2)
MOBILE WASTE CONTROL OF KENTUCKY
LOUISVILLE, KENTUCKY

BY
ROBERT W. KEISER
ABANDONED HAZARDOUS WASTE SITES SECTION
UNCONTROLLED SITES BRANCH
JANUARY, 1989

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APPENDICES

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| B- | Waste Description |
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SITE HISTORY

The landfill operated by Mobile Waste Controls of Kentucky (MWCK) is located at 7500 Grade Lane in Louisville, Kentucky (Appendix A). The landfill has been managed by MWCK, Central Fill; SCA of Kentucky and is currently operated by Waste Management of Kentucky.

In 1969, MWCK began receiving waste material at this landfill. They were receiving waste such as waste oils, paint sludge, industrial filters and empty drums. Some of the hazardous substances associated with this waste included asbestos, cadmium and lead. The waste was generated by several major industries in the Louisville area, such as International Harvester, Mobile Chemical Company, Anaconda Aluminum, American Standard and E. I. duPont (Appendix B).

Permits, dating back to 1979, show the site growing from approximately 35 acres to its current 479 acres (Appendix C). During this time period regulatory requirements have become more stringent and the potential impact on the environment was being studied in greater depth. Waste Management, the current owner, has installed several groundwater monitoring wells. Four of these wells and background wells are located on the map in Appendix A. In relation to the old MWCK landfill, these wells should provide a good indication of contamination levels in the groundwater. Some of the contaminants found in the groundwater were lead, arsenic and barium. The sample analyses from these wells are contained in Appendix D and give a more complete list of contaminants tested for and found. Samples were taken from July 1986 to July 1988 with the shallow wells being designated by the first letters WGS, and the deep wells being designated by the first letters WGD (Appendix D).

A Preliminary Assessment (PA) of MWCK was completed in May, 1985 (Appendix E). On November 7, 1988 a Preliminary Assessment (2) site visit was performed by Kentucky CERCLA PA/SI staff. On this visit it was found that the entire area is being monitored for groundwater contamination and further testing is being done to ensure environmental safety. A leachate collection system is in use on the active area of the landfill and it will be expanded when the old area, area used by MWCK, is re-opened (Appendix E).

ENVIRONMENTAL SETTING

The Mobile Waste Control of Kentucky site is located in the Outer Bluegrass physiographic region of Kentucky. The Outer Bluegrass is characterized by gently rolling hills with increased local relief in the vicinity of major streams (Reference 1).

The Outer Bluegrass includes outcrops of limestone and shale of the Maysville and Richmond groups of Ordovician age. The shaley limestone restricts the circulation of groundwater and consequently, sinkholes and underground streams are not well-developed in this region (Reference 2).

Groundwater in this area is found at depths starting at approximately 35 feet. Most drilled wells in this area are capable of producing 100 to 500 gallons of water a day at depths of less than 100 feet. Water is hard or very hard and may contain salt or hydrogen sulfide (Reference 3).

The climate of Jefferson County is temperate and favorable for many types of plants and animals. Summers are generally warm and humid while winters are moderately cold. Average annual precipitation exceeds 40 inches and is fairly well distributed throughout the year (Reference 2).

Soils in the area are classified as the Zipp series. The Zipp series is a silty clay, poorly drained soil that formed in fine-textured, clacareous sediment in the slack-water flats. The plow layer is dark-gray silty clay or silty clay loam. The subsoil, to a depth of about 42 inches, is gray and mottled brown clay that is plastic and sticky. It grades to mottled gray, yellowish-brown and brown clay that is very plastic and sticky (Reference 2).

Surface water drains into Slop Ditch which is on the eastern and southern edges of the original area used by Mobile Waste Control. Slop Ditch travels a few hundred feet and drains into the southern ditch. Flowing to the southwest three miles, surface water enters Pond Creek. From this point it travels 14 miles and enters the Salt River, approximately one mile east of the Salt River's confluence with the Ohio River (Appendix F).

TARGET ANALYSIS

The landfill used by Mobile Waste Controls is located in an area bordered by residential property to the south and east and industrial property to the north and west. The nearest home is approximately 1,500 feet away.

There are no known residents using groundwater for drinking purposes within a four mile radius of the site. By comparing U.S.G.S. topographic maps with municipal water line distribution maps provided by the Louisville Water Company, it was determined that municipal water was available to all homes in the area.

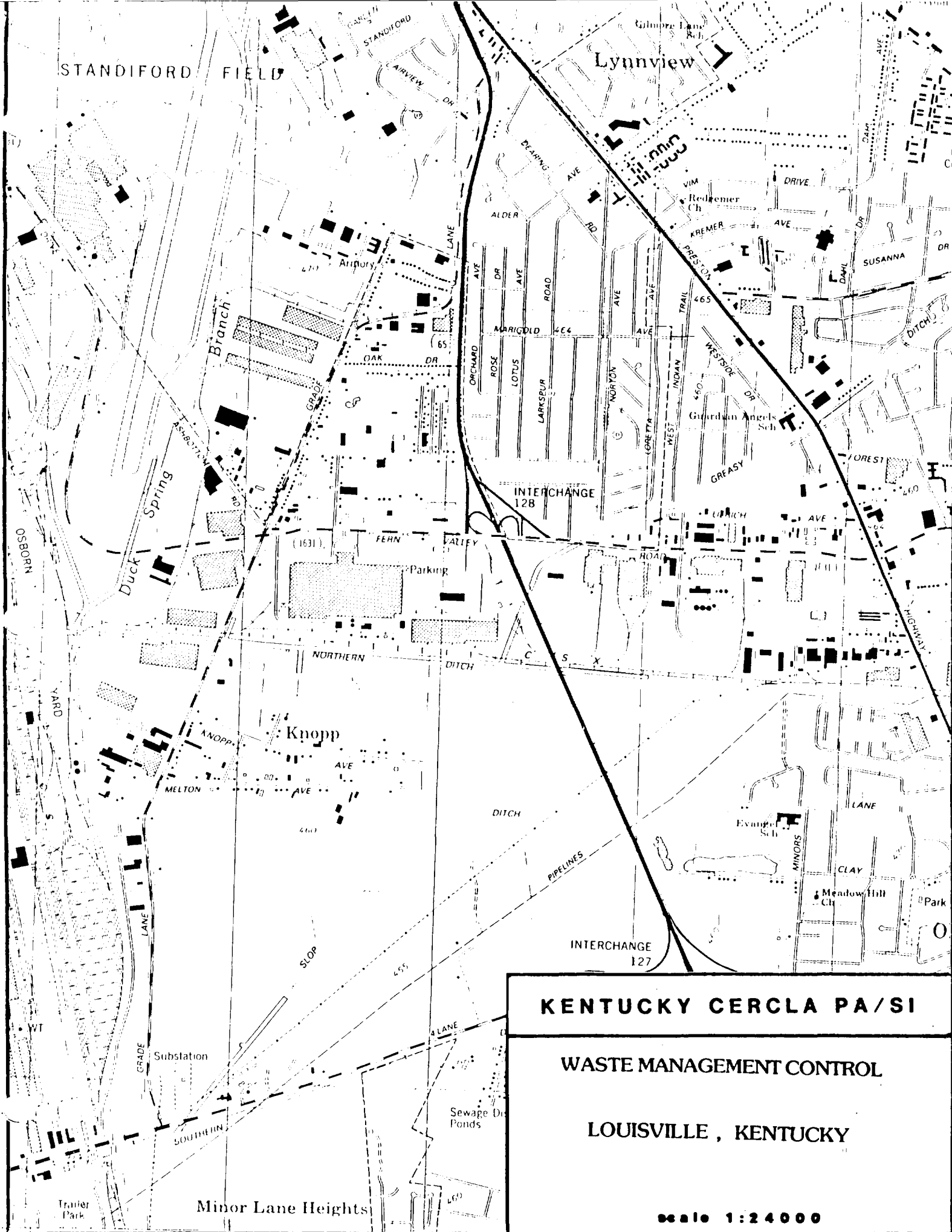
The Louisville Water Company's intake is located on the Ohio River, several miles upstream from the point of confluence of the Salt River and Ohio River. There are no municipal or industrial intakes within 15 miles downstream from the site.

The landfill area used by Mobile Waste Controls has relatively easy access. Part of the area is used by the Kentucky Department of Transportation to store concrete road barriers while another section is used by a neighboring company to store large sections of plastic pipe. There are no schools, churches or day-care centers within a one mile radius of the site.

According to the Kentucky Nature Preserves Commission, there are eight species located with four miles of the site which are listed as rare, threatened or endangered, none of which are currently federally listed (Appendix G).

REFERENCES

1. Kentucky Geological Survey-1964. Geochemistry of Natural Waters of the Bluegrass Region, Kentucky.
2. U.S.D.A.-1966. Soil Survey of Jefferson County, Kentucky.
3. U.S.G.S.-1960. Availability of Groundwater in Bullitt, Jefferson and Oldham Counties, Kentucky.

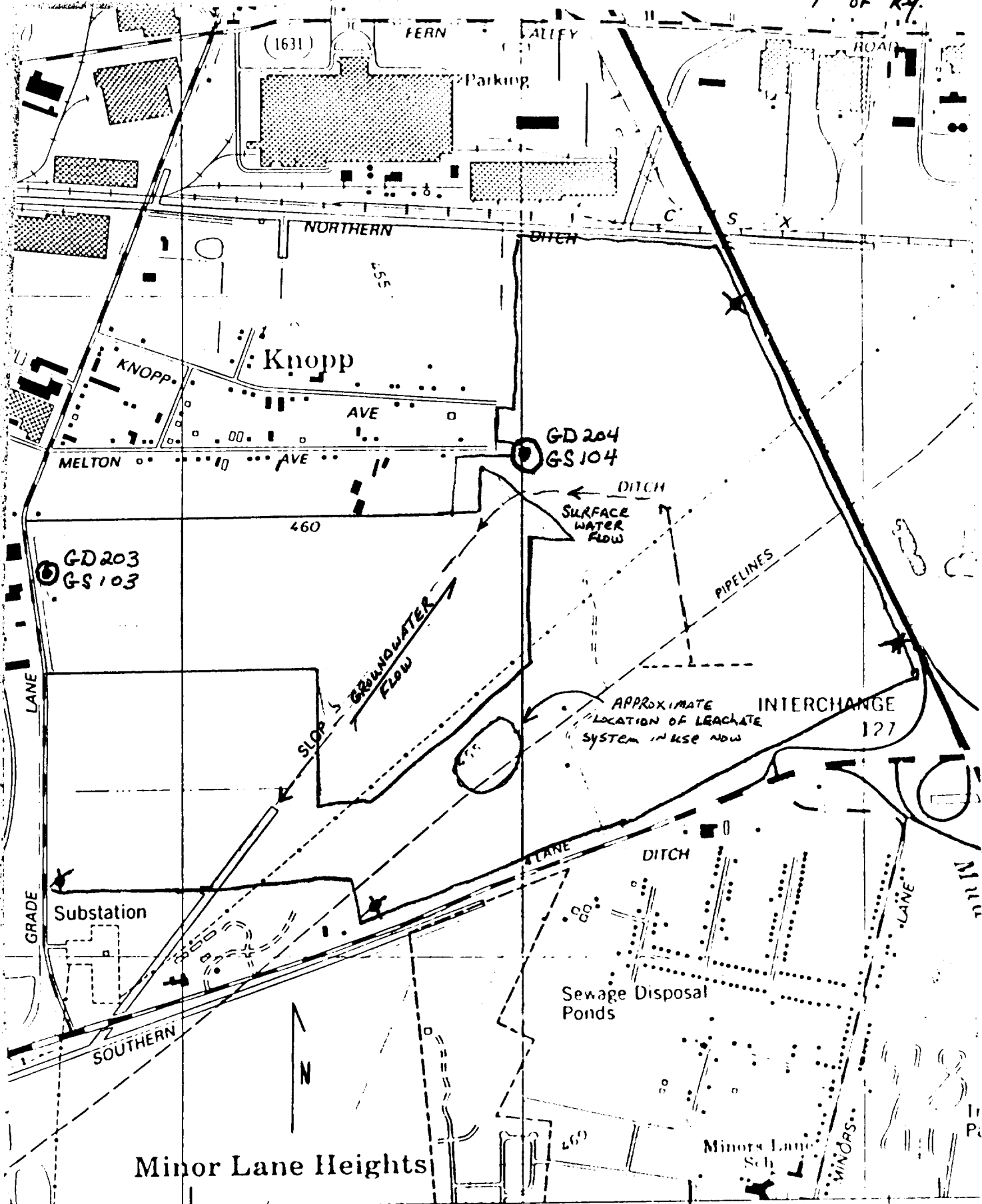


KENTUCKY CERCLA PA/SI

WASTE MANAGEMENT CONTROL

LOUISVILLE , KENTUCKY

scale 1:24000



Record of Communication

☒ PHONE CALL
☐ CONFERENCE

☐ DISCUSSION
☐ OTHER

☐ ON-SITE
☐ ON-CALL

TO: *File*

FROM: *Bob Keiser*


DATE: *1-23-89*

TIME: *9:00 AM*

SUBJECT:

Location of Background groundwater wells

SUMMARY OF COMMUNICATION:

I spoke with Shird Robinson of Waste MGT. And asked for the location of groundwater wells used as Background. Talking by phone, it was difficult to mark the exact location, but the wells are in the approximate area. On the maps in Appendix A these wells are located using the symbol .

Robert W. Keiser

CONCLUSIONS, ACTION TAKEN OR REQUIRED:

1-23-89

INFORMATION COPIES

TO:

EUGENE F. MOONEY
SECRETARY



656.00
JULIAN M. CARROLL
GOVERNOR

COMMONWEALTH OF KENTUCKY
DEPARTMENT FOR NATURAL RESOURCES AND ENVIRONMENTAL PROTECTION
BUREAU OF ENVIRONMENTAL PROTECTION

A. L. ROARK
COMMISSIONER

FRANKFORT, KENTUCKY 40601
October 30, 1978

Mr. Emmitt L. Vanzant
Operations Manager
Mobile Waste Controls of Ky., Inc.
P. O. Box 21100
Louisville, Kentucky 40201

Dear Mr. Vanzant:

This letter is in response to a request for permission to dispose of special and/or hazardous waste from **International Harvester** Company dated September 5, 1978. Permission is hereby granted for the disposal of the following wastes in their respective quantities at your landfill #056.08 in Jefferson County:

| | |
|-------------------------------------|----------------------|
| Sludge from garage wash pit | 8,000 gallons/year |
| Sludge from dye wash pit | 18,000 gallons/year |
| Paint sludge from spray booth | 261 cubic yards/year |
| Sludge from forging press pits | 247,900 gallons/year |
| Sludge from carburizer furnace pits | 12,000 gallons/year |

You may consider this letter as permission to dispose of the sludge until May 1, 1979, expiration date of your current permit. At that time, we will again review the disposal request and make a decision as to further acceptance of the waste.

If you have any questions, please feel free to contact me.

Sincerely,

Caroline Patrick Haight

Caroline Patrick Haight, Chief
Non-Hazardous Waste Management Section
Hazardous Material & Waste Management

CPH:mg

cc: International Harvester Company
Louisville Pipe Cleaning Company
Dan Dolan, Chief, Hazardous Materials Section ✓
Ross Singleton, Area Supervisor
John Brooks, Inspector
Bob Sholar, Inspector

KENTUCKY DEPARTMENT FOR NATURAL RESOURCES
AND ENVIRONMENTAL PROTECTION
DIVISION OF HAZARDOUS MATERIAL AND WASTE MANAGEMENT

Application for Permission to Dispose
of Special and/or Hazardous Waste at
a Permitted Disposal Site

M-1

FOR AGENCY USE

Received _____

Issued _____

Expires _____

Site No. _____

Approved _____

I. GENERAL INFORMATION

A. Disposal Site: MOBILE WASTE CONTROL INC.
(name) (site no.)

JEFFERSON
(county)

I-65 AND OUTER LOOP
(location)

B. Waste Hauler

Waste Generator

Co. Name/Indiv. Name: MOBILE WASTE

MILL ROOM - COMPOUNDING

Street: CONTROL INC. SEE EXHIBIT

City, State: I

Telephone: _____

Driver's Name: _____

Person in Charge: _____

II. WASTE CHARACTERISTICS

A. Source (Indicate S.I.C. Industry Classification 2822.)

B. Description (Descriptive or Common)

1. Indicate Waste Name: COMPOUNDING AREA GROUP I - PIGMENT DUST

2. Waste is: Liquid _____, Solid X, Semi-Solid _____, Other _____ (check one)

3. Percent of Solids by Volume: 99.9 %

4. Expected Volume is: _____ gallons 110 or Cubic Yards X per year.

C. Properties

1. Acidity-Alkalinity: High _____ Moderate _____ Low _____ None X

As: HCL _____ H₂SO₄ _____ HNO₃ _____ NaOH _____

NH₄OH _____ Other (list) _____

2. Volatility: High _____ Moderate _____ Low X None _____

3. Toxicity (dermal): High _____ Moderate _____ Low _____ None NOT REQUIRED

4. Toxicity (inhalation): High _____ Moderate _____ Low _____ None X

5. Toxicity (ingestion): High _____ Moderate _____ Low _____ None NOT REQUIRED

6. Other (describe): _____

D. Analyses

1. Waste is: Organic _____ Inorganic X Mixture X (check one)

2. List organic components (% by weight):

NO COMPONENTS > 0.1 %



**METRO
SERVICE
LABORATORIES**

Chemical Analysts and Consultants

822 EAST MARKET STREET
LOUISVILLE, KENTUCKY 40206
TEL: (502) 587-8710

SOLID AND HAZARDOUS WASTE REPORT

Received From: B. F. Goodrich

Date Received: 11-3-78

Sample Markings: Hazardous Waste Study
Group I-CMPD
11-3-78; 10:45AM.

Certificate No. 3524

Initial Leach pH 9.76
Total Free Cyanide (mg/l) <5
Flash Point (°F) >200

| | <u>TOTAL</u> (mg/l) | <u>DISSOLVED</u> (mg/l) | <u>SUSPENDED</u> (mg/l) |
|----------|------------------------|----------------------------|----------------------------|
| Arsenic | 0.011 | 0.009 | 0.002 |
| Cadmium | 142.000 | 135.000 | 7.000 |
| Chromium | 2.29 | <0.01 | 2.29 |
| Copper | 0.11 | <0.01 | 0.11 |
| Mercury | 0.006 | <0.001 | 0.006 |
| Nickel | 0.5 | 0.3 | 0.2 |
| Lead | 7.210 | 7.050 | 0.16 |
| Zinc | 4.80 | 4.65 | 0.15 |

< indicates less than
> indicates greater than

Reported: 11/21/78

METRO SERVICE LABORATORIES.

Harold Webb

SCA SERVICES OF KENTUCKY, INC.

Jefferson County

Permit #056.28

May 16, 1982 thru May 16, 1983

SPECIAL PROVISIONS:

1. Revised engineering plans shall be submitted and approved by this Division by July 1, 1982.
2. No industrial or special waste other than the following may be accepted without prior written approval from this Department:

| <u>DATE PERMITTED</u> | <u>COMPANY NAME</u> | <u>AMOUNT</u> | <u>TYPE</u> |
|-----------------------|------------------------------------|---------------------|--|
| 5-4-82 | Rohm & Haas Inc. | 750 cu. yds./yr. | KV dust |
| 4-30-82 | Louisville Varnish | 8 cu. yds./mo. | empty paint containers |
| 4-13-82 | Cissell Manufacturing Co. | 36 drums/yr. | paint sludge |
| 3-26-82 | Acme Printing Ink Co. | 10 drums/mo. | empty drums |
| 3-18-82 | International Harvester | 20 bags/mo. | filter bags |
| 3-18-82 | International Harvester | 60 cu. yds./yr. | grinding sludge |
| 3-18-82 | International Harvester | 2,000 gal./yr. | drum storage pit sludge |
| 3-18-82 | International Harvester | 650 cu. yds./yr. | baghouse dust |
| 2-18-82 | Southern Gravure Service, Inc. | 12 drums/yr. | steel bandsaw chips |
| 2-26-82 | Jeffersontown Water & Sewer | 84 cu. yds./yr. | dried sewage sludge |
| 1-26-82 | Reliance Universal | 1150 cu. yds./yr. | empty containers |
| 12-1-81 | American Synthetic Rubber | 75 cu. yds./yr. | synthetic rubber |
| 11-20-81 | Naval Ordnance Station | 200 cu. yds./yr. | asbestos |
| 11-9-81 | Porcelain Metals Corp. | 1,100 gal./yr. | porcelain metal sludge |
| 11-5-81 | National Lighting Standard | 14 drums/yr. | empty drums |
| 10-7-81 | International Harvester | 40,000 cu. yds./yr. | foundry waste sand |
| 9-28-81 | Automatic Spray System Co. | 100 lbs./yr. | spent detia fumigant |
| 9-18-81 | Tube Turns Div. of Chemetron | 3,500 gal./yr. | forging pit sludge |
| 9-16-81 | Brown Forman Dist. Corp. | 19,000 gal./yr. | fly ash slurry |
| 9-10-81 | Rohm & Haas Inc. | 1,000 drums/yr. | empty steel drums |
| 8-10-81 | Ralston Purina Co. | 20 cu. yds./yr. | separation basin sludge |
| 7-30-81 | Dover Corporation | 22,500 cu. yds./yr. | foundry waste mixture |
| 7-29-81 | Rohm & Haas Inc. | 500 cu. yds./yr. | filter bags, cartridges & socks from KU and KAC processes |
| 4-81 | Celanese Plastics & Specialties | 560 cu. yds./yr. | paper, general trash, guar gum waste |
| 6-3-81 | Mobil Chemical Co. | 18.5 cu. yds./yr. | dried cumo filters |

SCA SERVICES OF KENTUCKY, INC.
 Jefferson County
 Permit #056.28
 May 16, 1982 thru May 16, 1983
SPECIAL PROVISIONS: (Cont.)

| <u>DATE PERMITTED</u> | <u>COMPANY NAME</u> | <u>AMOUNT</u> | <u>TYPE</u> |
|-----------------------|---------------------------------|--------------------|---|
| 5-13-81 | Anaconda Aluminum | 300 gal./mo. | waste cold glues |
| 5-13-81 | United Catalyst, Inc. | 100 cu ft./yr. | tixogel waste |
| 2-24-81 | Celanese Plastics & Specialties | 20 tons/yr. | solid epoxy resin |
| 2-5-81 | Reliance Universal | 50 drums/yr. | filter cartridges & bags |
| 1-14-81 | American Standard | 1,000 cu. yds./yr. | iron foundry rotoclone waste |
| 1-14-81 | American Standard | 750 cu. yds./yr. | iron baghouse cleaning house waste |
| 1-14-81 | American Standard | 500 cu. yds./yr. | iron rotoclone cleaning house waste |
| 12-30-80 | Liquid Transporters, Inc. | 3,150 cu. yds./yr. | wastewater sludge |
| 12-10-80 | E I du Pont de Nemours | 100 cu. yds./yr. | fly ash |
| 12-10-80 | E I du Pont de Nemours | 4,500 gal./yr. | dewatered sludge from neoprene wastewater treatment |
| 10-20-80 | E I du Pont de Nemours | 2,600 cu. yds./yr. | dewatered sludge from freon wastewater treatment sludge |
| 5-80 | Robus Products Corp. | 4,680 cu. yds./yr. | leather-board buffing dust |
| 7-2-80 | Spalding's Services | 60 cu. yds./yr. | waste mud |
| 5-1-80 | American Air Filter | 610 cu. ft./yr. | solidified urea formaldehyde resin |
| 6-10-80 | Reynolds Aluminum, plant #3 | 25 cu. yds./yr. | decomposed aluminum powder |
| 5-21-80 | Cissell Manufacturing Co. | 36 drums/yr. | paint sludge |
| 4-30-80 | Veterans Administration Hosp. | ---- | contaminated trash |
| 4-4-80 | Cardinal Industrial Insulation | 300 drums/yr. | asbestos containing waste |
| 2-27-80 | E I du Pont de Nemours | 5,500 cu. yds./yr. | solid waste neoprene |
| 2-4-80 | Hobart Corporation | 16 cu. yds./yr. | zinc and phosphate |
| 1-23-80 | BFGoodrich | 50 cu. yds./yr. | asbestos containing insulation |
| 10-3-79 | Beagent Chemical & Research | 52,000 lbs./yr. | calcium sulfate diatomaceous earth |

akw

CENTRAL FILL, INC.

Jefferson County

Permit #056.28

May 16, 1981 thru May 16, 1982

SPECIAL PERMISSIONS:

- (2.) No industrial or special waste other than the following may be accepted without prior written approval from this Department:

| <u>Company</u> | <u>Amount</u> | <u>Type of Waste</u> |
|--|--------------------|-------------------------------------|
| American Air Filter | 610 cu. ft./yr. | solidified urea formaldehyde resin |
| Reagent Chemicals & Research, Inc. | 53,000 lbs./yr. | calcium sulfate-Diatomaceous earth |
| Veterans Administration Hospital | | contaminated trash |
| Robus Products Corp. | 4,680 cu. yds./yr. | leatherboard buffing dust |
| Liquid Transporters, Inc. | 3,150 cu. yds./yr. | wastewater sludge from empty tanks |
| American Standard | 1,000 cu. yds./yr. | iron foundry rotoclone waste |
| American Standard | 750 cu. yds./yr. | iron baghouse cleaning house waste |
| American Standard | 500 cu. yds./yr. | iron rotoclone cleaning house waste |
| Celanese Plastics & Specialties Company | 20 tons/yr. | solid epoxy resin |
| Reliance Universal | 50 drums/yr. | filter cartridges & bags |
| Louisville-Jefferson Co. Metro Sewer | 70,000 tons/yr. | sewage sludge |

akw

CENTRAL FILL, INC.

Jefferson County

Permit #056.28

May 16, 1981 thru May 16, 1982

SPECIAL PERMISSIONS:

- (2.) No industrial or special waste other than the following may be accepted without prior written approval from this Department:

| <u>Company</u> | <u>Amount</u> | <u>Type of Waste</u> |
|--|--------------------|-------------------------------------|
| American Air Filter | 610 cu. ft./yr. | solidified urea formaldehyde resin |
| Reagent Chemicals & Research, Inc. | 53,000 lbs./yr. | calcium sulfate-Diatomaceous earth |
| Veterans Administration Hospital | | contaminated trash |
| Robus Products Corp. | 4,680 cu. yds./yr. | leatherboard buffing dust |
| Liquid Transporters, Inc. | 3,150 cu. yds./yr. | wastewater sludge from empty tanks |
| American Standard | 1,000 cu. yds./yr. | iron foundry rotoclone waste |
| American Standard | 750 cu. yds./yr. | iron baghouse cleaning house waste |
| American Standard | 500 cu. yds./yr. | iron rotoclone cleaning house waste |
| Celanese Plastics & Specialties Company | 20 tons/yr. | solid epoxy resin |
| Reliance Universal | 50 drums/yr. | filter cartridges & bags |
| Louisville-Jefferson Co. Metro Sewer | 70,000 tons/yr. | sewage sludge |

akw

CENTRAL FILL, INC.

Jefferson County

Permit #056.28

May 16, 1980 thru May 13, 1981

SPECIAL PROVISIONS:

1. No leachate shall leave the site.
2. No industrial or special waste other than the following may be accepted without prior written approval by this Department:

| <u>Company</u> | <u>Amount</u> | <u>Type</u> |
|------------------------------------|--------------------|------------------------------------|
| American Air Filter | 610 cubic ft./year | Solidified urea formaldehyde resin |
| Reagent Chemicals & Research, Inc. | 53,000 lbs./year | Calcium sulfate-Diatomaceous earth |

akw



DIVISION OF WASTE MANAGEMENT

WASTE MANAGEMENT PERMIT



WASTE MANAGEMENT OF KENTUCKY, INC.
dba Outer Loop Landfill
P.O. Box 19498
Louisville, Kentucky 40219

--Amended--
(Name Change)

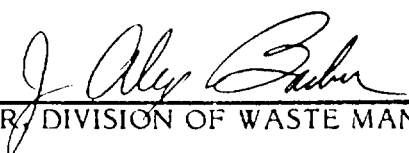
The Division of Waste Management hereby grants the above-named facility a permit to engage in the activity specified below. This permit does not confere an unqualified right, but is subject to the waste management provisions of KRS Chapter 224 and regulations promulgated pursuant thereto. Conformance with all such laws and regulations is the responsibility of the permittee. Further, this permit is subject to any conditions and operating limitations specified below:

To be operated as per plans approved September 25, 1985.

No deviation from the terms and conditions of this permit is allowed without prior written authorization from the Division. Violation of the terms and conditions specified herein shall render this permit null and void. All rights of inspection by Division of Waste Management representatives are reserved.

Receipt of the permit fee and bond amount specified below is hereby acknowledged.

| | | | |
|-------------------------|--------------------|----------------------------|----------------------|
| PERMIT TYPE: | Operation | PERMIT NUMBER: | 056.28 |
| WASTE CATEGORY: | Solid Waste | TYPE OF ACTIVITY: | Residential Landfill |
| CLOSURE FUND: | \$1,770,000 | LIABILITY INSURANCE (SO): | NA |
| CLOSURE INSTRUMENT: | LC #212.01134 | LIABILITY INSURANCE (NSO): | NA |
| POSTCLOSURE FUND: | NA | PERMIT FEE: | NA |
| POSTCLOSURE INSTRUMENT: | NA | COUNTY: | Jefferson |
| ACRES: | 479 | ISSUE DATE: | April 6, 1987 |
| EFFECTIVE DATE: | September 25, 1985 | EXPIRATION DATE: | September 25, 1990 |


DIRECTOR, DIVISION OF WASTE MANAGEMENT



DIVISION OF WASTE MANAGEMENT

WASTE MANAGEMENT PERMIT



SCA SERVICES OF KENTUCKY, INC.
A Waste Management Company
P.O. Box 34457
Louisville, Kentucky 40219

--Amended--

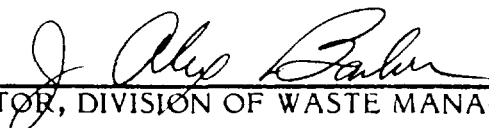
The Division of Waste Management hereby grants the above-named facility a permit to engage in the activity specified below. This permit does not confer an unqualified right, but is subject to the waste management provisions of KRS Chapter 224 and regulations promulgated pursuant thereto. Conformance with all such laws and regulations is the responsibility of the permittee. Further, this permit is subject to any conditions and operating limitations specified below:

To be operated as per plans approved September 25, 1985.

No deviation from the terms and conditions of this permit is allowed without prior written authorization from the Division. Violation of the terms and conditions specified herein shall render this permit null and void. All rights of inspection by Division of Waste Management representatives are reserved.

Receipt of the permit fee and bond amount specified below is hereby acknowledged.

| | | | |
|-------------------------|--------------------|----------------------------|----------------------|
| PERMIT TYPE: | Operation | PERMIT NUMBER: | 056.28 |
| WASTE CATEGORY: | Solid Waste | TYPE OF ACTIVITY: | Residential Landfill |
| CLOSURE FUND: | \$1,770,000 | LIABILITY INSURANCE (SO): | NA |
| CLOSURE INSTRUMENT: | Bond #5447634-IC | LIABILITY INSURANCE (NSO): | NA |
| POSTCLOSURE FUND: | NA | PERMIT FEE: | NA |
| POSTCLOSURE INSTRUMENT: | NA | COUNTY: | Jefferson |
| ACRES: | 479 | ISSUE DATE: | May 29, 1986 |
| EFFECTIVE DATE: | September 25, 1985 | EXPIRATION DATE: | September 25, 1990 |


DIRECTOR, DIVISION OF WASTE MANAGEMENT



DIVISION OF WASTE MANAGEMENT

WASTE MANAGEMENT PERMIT



SCA SERVICES OF KENTUCKY, INC.
A Waste Management Company
P.O. Box 34457
Louisville, Kentucky 40219

The Division of Waste Management hereby grants the above-named facility a permit to engage in the activity specified below. This permit does not confer an unqualified right, but is subject to the waste management provisions of KRS Chapter 224 and regulations promulgated pursuant thereto. Conformance with all such laws and regulations is the responsibility of the permittee. Further, this permit is subject to any conditions and operating limitations specified below:

1. This permit hereby voids and supercedes previous permit number 056.08.
2. To be operated as per plans approved September 25, 1985.
3. Groundwater monitoring wells GS-106, 107, and 109 shall be installed no later than 45 days from issuance of this permit.
4. The first set of groundwater monitoring analyses from all wells shall be submitted no later than 75 days from issuance of this permit.
5. Bonds shall be consolidated and new bond submitted to cover the closure of Sections 1, 2 and 3 no later than November 1, 1985.
6. Operation is limited to Sections 1, 2 and 3 as shown on sheet 2 of the drawings.

No deviation from the terms and conditions of this permit is allowed without prior written authorization from the Division. Violation of the terms and conditions specified herein shall render this permit null and void. All rights of inspection by Division of Waste Management representatives are reserved.

Receipt of the permit fee and bond amount specified below is hereby acknowledged.

| | | | |
|-------------------------|--------------------|----------------------------|----------------------|
| PERMIT TYPE: | Operation | PERMIT NUMBER: | 056.28 |
| WASTE CATEGORY: | Solid Waste | TYPE OF ACTIVITY: | Residential Landfill |
| CLOSURE FUND: | * | LIABILITY INSURANCE (SO): | NA |
| CLOSURE INSTRUMENT: | * | LIABILITY INSURANCE (NSO): | NA |
| POSTCLOSURE FUND: | NA | PERMIT FEE: | \$500 |
| POSTCLOSURE INSTRUMENT: | NA | COUNTY: | Jefferson |
| ACRES: | 479 | ISSUE DATE: | September 25, 1985 |
| EFFECTIVE DATE: | September 25, 1985 | EXPIRATION DATE: | September 25, 1990 |

*Surety Bond #8106-90-34 - \$38,500
Surety Bond #400 GB 4688 - \$23,000


DIRECTOR, DIVISION OF WASTE MANAGEMENT



DIVISION OF WASTE MANAGEMENT

WASTE MANAGEMENT PERMIT



SCA SERVICES OF KENTUCKY, INC.
P.O. Box 34457
200 High Rise
Louisville, Kentucky 40232

The Division of Waste Management hereby grants the above-named facility a permit to engage in the activity specified below. This permit does not confere an unqualified right, but is subject to the waste management provisions of KRS Chapter 224 and regulations promulgated pursuant thereto. Conformance with all such laws and regulations is the responsibility of the permittee. Further, this permit is subject to any conditions and operating limitations specified below:

No deviation from the terms and conditions of this permit is allowed without prior written authorization from the Division. Violation of the terms and conditions specified herein shall render this permit null and void. All rights of inspection by Division of Waste Management representatives are reserved.

Receipt of the permit fee and bond amount specified below is hereby acknowledged.

| | | | |
|-------------------------|---------------------|----------------------------|----------------------|
| PERMIT TYPE: | Operation | PERMIT NUMBER: | 056.28 |
| WASTE CATEGORY: | Solid Waste | TYPE OF ACTIVITY: | Residential Landfill |
| CLOSURE FUND: | \$23,000 | LIABILITY INSURANCE (SO): | NA |
| CLOSURE INSTRUMENT: | Surety #400 BG 4688 | LIABILITY INSURANCE (NSO): | NA |
| POSTCLOSURE FUND: | NA | PERMIT FEE: | \$250 (Renewal) |
| POSTCLOSURE INSTRUMENT: | NA | COUNTY: | Jefferson |
| ACRES: | 34.8 | ISSUE DATE: | May 25, 1984 |
| EFFECTIVE DATE: | May 16, 1984 | EXPIRATION DATE: | May 16, 1989 |


DIRECTOR, DIVISION OF WASTE MANAGEMENT



DIVISION OF WASTE MANAGEMENT
WASTE MANAGEMENT PERMIT



SCA SERVICES OF KENTUCKY, INC.
P.O. Box 34457
200 High Rise
Louisville, Kentucky 40232

—AMENDED—

The Division of Waste Management hereby grants the above-named facility a permit to engage in the activity specified below. This permit does not confere an unqualified right, but is subject to the waste management provisions of KRS Chapter 224 and regulations promulgated pursuant thereto. Conformance with all such laws and regulations is the responsibility of the permittee. Further, this permit is subject to any conditions and operating limitations specified below:

This permit is modified as per plans approved on September 30, 1983.

No deviation from the terms and conditions of this permit is allowed without prior written authorization from the Division. Violation of the terms and conditions specified herein shall render this permit null and void. All rights of inspection by Division of Waste Management representatives are reserved.

Receipt of the permit fee and bond amount specified below is hereby acknowledged.

| | | | |
|-------------------------|---------------------|----------------------------|----------------------|
| PERMIT TYPE: | Operation | PERMIT NUMBER: | 056.28 |
| WASTE CATEGORY: | Solid Waste | TYPE OF ACTIVITY: | Residential Landfill |
| CLOSURE FUND: | \$23,000 | LIABILITY INSURANCE (SO): | NA |
| CLOSURE INSTRUMENT: | Surety #400 BG 4688 | LIABILITY INSURANCE (NSO): | NA |
| POSTCLOSURE FUND: | NA | PERMIT FEE: | NA |
| POSTCLOSURE INSTRUMENT: | NA | COUNTY: | Jefferson |
| ACRES: | 34.8 | ISSUE DATE: | September 30, 1983 |
| EFFECTIVE DATE: | May 16, 1983 | EXPIRATION DATE: | May 16, 1984 |

J. Albert Barber c.m.

DIRECTOR, DIVISION OF WASTE MANAGEMENT



DIVISION OF WASTE MANAGEMENT

WASTE MANAGEMENT PERMIT



SCA SERVICES OF KENTUCKY, INC.

P.O. Box 34457
200 High Rise
Louisville, Kentucky 40232

The Division of Waste Management hereby grants the above-named facility a permit to engage in the activity specified below. This permit does not confere an unqualified right, but is subject to the waste management provisions of KRS Chapter 224 and regulations promulgated pursuant thereto. Conformance with all such laws and regulations is the responsibility of the permittee. Further, this permit is subject to any conditions and operating limitations specified below:

1. All interim cover and grading shall be completed by August 1, 1983.
2. All leachate outbreaks shall be corrected immediately.
3. No leachate shall leave the site.

No deviation from the terms and conditions of this permit is allowed without prior written authorization from the Division. Violation of the terms and conditions specified herein shall render this permit null and void. All rights of inspection by Division of Waste Management representatives are reserved.

Receipt of the permit fee and bond amount specified below is hereby acknowledged.

| | | | |
|-------------------------|--------------------|----------------------------|----------------------|
| PERMIT TYPE: | Operation | PERMIT NUMBER: | 056.28 |
| WASTE CATEGORY: | Solid Waste | TYPE OF ACTIVITY: | Residential Landfill |
| CLOSURE FUND: | \$23,000 | LIABILITY INSURANCE (SO): | NA |
| CLOSURE INSTRUMENT: | Surety 400 BG 4688 | LIABILITY INSURANCE (NSO): | NA |
| POSTCLOSURE FUND: | NA | PERMIT FEE: | \$250 (renewal) |
| POSTCLOSURE INSTRUMENT: | NA | COUNTY: | Jefferson |
| ACRES: | 34.8 | ISSUE DATE: | July 7, 1983 |
| EFFECTIVE DATE: | May 16, 1983 | EXPIRATION DATE: | May 16, 1984 |


DIRECTOR, DIVISION OF WASTE MANAGEMENT



DIVISION OF WASTE MANAGEMENT

WASTE MANAGEMENT PERMIT



SCA SERVICES OF KENTUCKY, INC.
P.O. Box 34457
200 High Rise
Louisville, Kentucky 40232

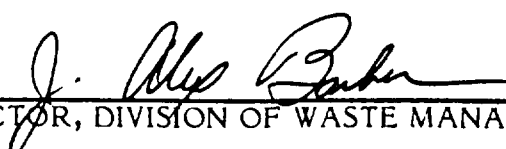
The Division of Waste Management hereby grants the above-named facility a permit to engage in the activity specified below. This permit does not confere an unqualified right, but is subject to the waste management provisions of KRS Chapter 224 and regulations promulgated pursuant thereto. Conformance with all such laws and regulations is the responsibility of the permittee. Further, this permit is subject to any conditions and operating limitations specified below:

--SEE ATTACHMENT--

No deviation from the terms and conditions of this permit is allowed without prior written authorization from the Division. Violation of the terms and conditions specified herein shall render this permit null and void. All rights of inspection by Division of Waste Management representatives are reserved.

Receipt of the permit fee and bond amount specified below is hereby acknowledged.

| | | | |
|-------------------------|-------------------|----------------------------|----------------------|
| PERMIT TYPE: | Operation | PERMIT NUMBER: | 056.28 |
| WASTE CATEGORY: | Solid Waste | TYPE OF ACTIVITY: | Residential Landfill |
| CLOSURE FUND: | \$23,000 | LIABILITY INSURANCE (SO): | NA |
| CLOSURE INSTRUMENT: | Surety #400GB4688 | LIABILITY INSURANCE (NSO): | NA |
| POSTCLOSURE FUND: | NA | PERMIT FEE: | \$250 (renewal) |
| POSTCLOSURE INSTRUMENT: | NA | COUNTY: | Jefferson |
| ACRES: | 34.8 | ISSUE DATE: | June 4, 1982 |
| EFFECTIVE DATE: | May 16, 1982 | EXPIRATION DATE: | May 16, 1983 |


DIRECTOR, DIVISION OF WASTE MANAGEMENT

June 4, 1982

Mr. Lee Ellenberger
SCA Services of Kentucky, Inc.
P.O. Box 34457
200 High Rise
Louisville, Kentucky 40232

Re: Site #056.28
Jefferson County

Dear Mr. Ellenberger:

Attached is your permit renewal for the referenced landfill and a list of industrial or special wastes which have been approved for disposal at your site. Under the new Solid Waste Regulations, the disposal of these wastes is now considered a permit modification and will not expire unless suspended or revoked by this Department. Therefore, the wastes will not be listed on the permit in the future.

If you have any questions, please contact this office.

Sincerely,

Caroline Patrick Haight
Manager, Compliance Branch
Division of Waste Management

CPH:MG:akw

Attachments

cc: John Brooks, Area Supervisor



DIVISION OF WASTE MANAGEMENT

WASTE MANAGEMENT PERMIT



--AMENDED--

SCA SERVICES OF KENTUCKY, INC.
P.O. Box 19380
Louisville, Kentucky 40219

--AMENDED--

The Division of Waste Management hereby grants the above-named facility a permit to engage in the activity specified below. This permit does not confere an unqualified right, but is subject to the waste management provisions of KRS Chapter 224 and regulations promulgated pursuant thereto. Conformance with all such laws and regulations is the responsibility of the permittee. Further, this permit is subject to any conditions and operating limitations specified below:

1. No leachate shall leave the site.
2. --See Attachment for Special Permissions--

No deviation from the terms and conditions of this permit is allowed without prior written authorization from the Division. Violation of the terms and conditions specified herein shall render this permit null and void. All rights of inspection by Division of Waste Management representatives are reserved.

Receipt of the permit fee and bond amount specified below is hereby acknowledged.

| | | | |
|-------------------------|-------------------|----------------------------|-------------------|
| PERMIT TYPE: | Operation | PERMIT NUMBER: | 056.28 |
| WASTE CATEGORY: | Solid Waste | TYPE OF ACTIVITY: | Sanitary Landfill |
| CLOSURE FUND: | \$23,000 | LIABILITY INSURANCE (SO): | NA |
| CLOSURE INSTRUMENT: | Surety #400GB4688 | LIABILITY INSURANCE (NSO): | NA |
| POSTCLOSURE FUND: | NA | PERMIT FEE: | NA |
| POSTCLOSURE INSTRUMENT: | NA | COUNTY: | Jefferson |
| ACRES: | 34.8 | ISSUE DATE: | January 21, 1982 |
| EFFECTIVE DATE: | January 21, 1982 | EXPIRATION DATE: | May 16, 1982 |

Carl A. Schwedn
DIRECTOR, DIVISION OF WASTE MANAGEMENT



DIVISION OF WASTE MANAGEMENT

WASTE MANAGEMENT PERMIT



CENTRAL FILL, INC.
7500 Grade Lane
Louisville, Kentucky 40219

The Division of Waste Management hereby grants the above-named facility a permit to engage in the activity specified below. This permit does not confer an unqualified right, but is subject to the waste management provisions of KRS Chapter 224 and regulations promulgated pursuant thereto. Conformance with all such laws and regulations is the responsibility of the permittee. Further, this permit is subject to any conditions and operating limitations specified below:

1. No leachate shall leave the site.
2. --See Attachment for Special Permissions--

No deviation from the terms and conditions of this permit is allowed without prior written authorization from the Division. Violation of the terms and conditions specified herein shall render this permit null and void. All rights of inspection by Division of Waste Management representatives are reserved.

Receipt of the permit fee and bond amount specified below is hereby acknowledged.

| | | | |
|-------------------------|-------------------|----------------------------|-------------------|
| PERMIT TYPE: | Operation | PERMIT NUMBER: | 056.28 |
| WASTE CATEGORY: | Solid Waste | TYPE OF ACTIVITY: | Sanitary Landfill |
| CLOSURE FUND: | \$23,000 | LIABILITY INSURANCE (SO): | NA |
| CLOSURE INSTRUMENT: | Surety #EX431 010 | LIABILITY INSURANCE (NSO): | NA |
| POSTCLOSURE FUND: | NA | PERMIT FEE: | NA |
| POSTCLOSURE INSTRUMENT: | NA | COUNTY: | Jefferson |
| ACRES: | 34.8 | ISSUE DATE: | May 5, 1981 |
| EFFECTIVE DATE: | May 16, 1981 | EXPIRATION DATE: | May 16, 1982 |

Roger Blaw by CP Haught
DIRECTOR, DIVISION OF WASTE MANAGEMENT

Permit Number

County Jefferson

Kentucky Department for Natural Resources and Environmental Protection

Commonwealth of Kentucky



Disposal Site Permit

THIS CERTIFIES THAT Central Fill, Inc. is hereby authorized to
operate a/an sanitary landfill located at 2705 Outer Loop, Louisville, KY.

IN COMPLIANCE WITH THE Kentucky Solid Waste Disposal Laws and Regulations KRS 224 and the rules and regulations of the Department for Natural Resources and Environmental Protection. This permit is not transferable and shall expire on May 16, 1981 unless sooner suspended or revoked.

SPECIAL PROVISIONS: SEE ATTACHMENT

THIS PERMIT MUST BE POSTED IN A CONSPICUOUS PLACE

Given under our hands at Frankfort, Kentucky, on this 13th day of May, 1980.

Roger Blair
Roger Blair, Director,
Division of Hazardous Material
and Waste Management

Norman E. Schell
Director, Division of
Solid Waste

Jackie Swigart
Secretary



Jefferson

John Y. Brown, Jr.
Governor

COMMONWEALTH OF KENTUCKY
DEPARTMENT FOR NATURAL RESOURCES AND ENVIRONMENTAL PROTECTION
BUREAU OF ENVIRONMENTAL PROTECTION
DIVISION OF HAZARDOUS MATERIAL AND WASTE MANAGEMENT
PINE HILL PLAZA
1121 LOUISVILLE ROAD
FRANKFORT, KENTUCKY 40601

May 13, 1980

Mr. Jerry Blankenship
Central Fill, Inc.
7500 Grade Lane
Louisville, KY 40219

Re: File No. ~~056.28~~

Dear Mr. Blankenship:

Transmitted, herewith, is the original of an "Operation" permit renewal issued to Central Fill, Inc. for a period of one year. May 16, 1981 permit will expire on

The site will be inspected periodically and the permit will be renewed upon written request, if justified. If the site is not operated in accordance with the rules and regulations of the Commonwealth of Kentucky, the permit may be revoked or shall automatically terminate at the end of the period specified therein.

Any modification of the site or facility shall be made only upon written notice to, and subject to, prior approval of the State Department for Natural Resources and Environmental Protection.

Sincerely,

Caroline Patrick Haight

Caroline Patrick Haight, Manager
Compliance Branch

CPH:akw

EUGENE F. MOONEY
SECRETARY



JULIAN M. CARROLL
GOVERNOR

COMMONWEALTH OF KENTUCKY
DEPARTMENT FOR NATURAL RESOURCES AND ENVIRONMENTAL PROTECTION
BUREAU OF ENVIRONMENTAL PROTECTION
DIVISION OF HAZARDOUS MATERIAL
AND WASTE MANAGEMENT
FRANKFORT, KENTUCKY 40601

May 1, 1976

Mr. Jerry Gladenship
Central Fill, Inc.
707 West Lane
Louisville, KY 40203

Re: File No. 10-100

Dear Mr. Gladenship:

Transmitted, herewith, is the original of an "Operation" permit renewal issued to Central Fill, Inc. for a period of 1 year. This permit will expire on 10-1-1977.

The site will be inspected periodically and the permit will be renewed upon written request, if justified. If the site is not operated in accordance with the rules and regulations of the Commonwealth of Kentucky, the permit may be revoked or shall automatically terminate at the end of the period specified therein.

Any modification of the site or facility shall be made only upon written notice to, and subject to, prior approval of the State Department for Natural Resources and Environmental Protection.

Sincerely,

Caroline Patrick Haight

Caroline Patrick Haight, Director
Non-Hazardous Waste Management Section

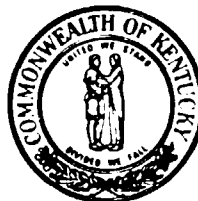
CPH:akw

Permit Number 056 28

County Jefferson

Kentucky Department for Natural Resources and Environmental Protection

Commonwealth



of Kentucky

Disposal Site Permit

THIS CERTIFIES THAT Central Fill, Inc. is hereby authorized to
operate a/an sanitary landfill located at 2705 Outer Loop, Louisville, Ky.

IN COMPLIANCE WITH THE Kentucky Solid Waste Disposal Laws and Regulations KRS 224 and the rules and regulations of the Department for Natural Resources and Environmental Protection. This permit is not transferable and shall expire on May 10, 1980 unless sooner suspended or revoked.

SPECIAL PROVISIONS: No leachate will leave the site.

THIS PERMIT MUST BE POSTED IN A CONSPICUOUS PLACE

Given under our hands at Frankfort, Kentucky, on this 1 day of May, 1979.

Norman E. Schell
Director, Division of
Solid Waste



ETC

JUN 30, 1988

TABLE 1: MISCELLANEOUS DATA (QR64)

Chain of Custody Data Required for ETC Data Management Summary Reports

BE5949 WASTE MANAGEMENT, INC.

730

WGS103

880609 1510 0

ETC Sample No.

Company

Facility

Sample Point

Date

Time

Elapsed
Hours

| Compound | Results | | | | | | | | | |
|----------------------------------|-------------------|-----|--|--|--|--|--|--|--|--|
| | Sample Concen. | MDL | | | | | | | | |
| Chemical Oxygen Demand (COD mg/l | 11 | 5 | | | | | | | | |
| Chloride mg/l | 72 | 1.0 | | | | | | | | |
| Total Organic Carbon mg/l | 4.9 | 1.0 | | | | | | | | |
| Total Organic Carbon mg/l | 4.6 | 1.0 | | | | | | | | |
| Total Dissolved Solids (TDS mg/l | 1500 | 10 | | | | | | | | |
| Iron ug/l | 2860 | 30 | | | | | | | | |
| Sodium ug/l | 29700 | 50 | | | | | | | | |
| Color, Apparent Co/Pt | <5 | 5 | | | | | | | | |
| Odor TON | 0 | - | | | | | | | | |

ETC

JUN 30, 1988

TABLE 1: MISCELLANEOUS DATA (QR64)

Chain of Custody Data Required for ETC Data Management Summary Reports

BE5950 WASTE MANAGEMENT, INC.

730

WGS104

880607 1925 0

ETC Sample No.

Company

Facility

Sample Point

Date

Time

Elapsed
Hours

| Compound | Results | | | | | | | | | |
|----------------------------------|-------------------|-----|--|--|--|--|--|--|--|--|
| | Sample Concen. | MDL | | | | | | | | |
| Chemical Oxygen Demand (COD mg/l | 8 | 5 | | | | | | | | |
| Chloride mg/l | 18 | 1.0 | | | | | | | | |
| Total Organic Carbon mg/l | 4.4 | 1.0 | | | | | | | | |
| Total Organic Carbon mg/l | 4.3 | 1.0 | | | | | | | | |
| Total Dissolved Solids (TDS mg/l | 450 | 10 | | | | | | | | |
| Iron ug/l | 2180 | 30 | | | | | | | | |
| Sodium ug/l | 13400 | 50 | | | | | | | | |
| Color, Apparent Co/Pt | 5 | 5 | | | | | | | | |
| Odor TON | 2 | - | | | | | | | | |



ETC

JUN 30, 1988

TABLE 1: MISCELLANEOUS DATA (QR64)

Chain of Custody Data Required for ETC Data Management Summary Reports

BE5943 WASTE MANAGEMENT, INC.

730

WGD203

880609 1715 0

ETC Sample No.

Company

Facility

Sample Point

Date

Time

Elapsed
Hours

| Compound | Results | | | | | | | |
|----------------------------------|-------------------|-----|--|--|--|--|--|--|
| | Sample Concen. | MDL | | | | | | |
| Chemical Oxygen Demand (COD mg/l | <5 | 5 | | | | | | |
| Chloride mg/l | 220 | 1.0 | | | | | | |
| Total Organic Carbon mg/l | <1.0 | 1.0 | | | | | | |
| Total Organic Carbon mg/l | <1.0 | 1.0 | | | | | | |
| Total Dissolved Solids (TDS mg/l | 740 | 10 | | | | | | |
| Iron ug/l | <30 | 30 | | | | | | |
| Sodium ug/l | 974 | 50 | | | | | | |
| Color, Apparent Co/Pt | <5 | 5 | | | | | | |
| Odor TON | >1024 | - | | | | | | |



ETC

JUN 30, 1988

TABLE 1: MISCELLANEOUS DATA (QR64)

Chain of Custody Data Required for ETC Data Management Summary Reports

BE5944 WASTE MANAGEMENT, INC.

730

WGD204

880608 1245 0

ETC Sample No.

Company

Facility

Sample Point

Date

Time

Elapsed
Hours

| Compound | Results | | | | | | | | | |
|----------------------------------|-------------------|-----|--|--|--|--|--|--|--|--|
| | Sample Concen. | MDL | | | | | | | | |
| Chemical Oxygen Demand (COD mg/l | 31 | 5 | | | | | | | | |
| Chloride mg/l | 660 | 1.0 | | | | | | | | |
| Total Organic Carbon mg/l | <1.0 | 1.0 | | | | | | | | |
| Total Organic Carbon mg/l | <1.0 | 1.0 | | | | | | | | |
| Total Dissolved Solids (TDS mg/l | 1800 | 10 | | | | | | | | |
| Iron ug/l | 114 | 30 | | | | | | | | |
| Sodium ug/l | 434000 | 50 | | | | | | | | |
| Color, Apparent Co/Pt | <5 | 5 | | | | | | | | |
| Odor TON | >1024 | - | | | | | | | | |

ETC

ENVIRONMENTAL
TESTING and CERTIFICATION

MAR 22, 1988

TABLE 1: MISCELLANEOUS DATA (QR64)

Chain of Custody Data Required for ETC Data Management Summary Reports

BD4921 WASTE MANAGEMENT, INC. 730 WGS104 880301 1800

ETC Sample No. Company Facility Sample Point Date Time Elapsed Hours

| Compound | Results | | | | | | | |
|-----------------------------------|-------------------|-----|--|--|--|--|--|--|
| | Sample Concen. | MDL | | | | | | |
| Ammonia as N mg/l | < 1 | 1 | | | | | | |
| Chemical Oxygen Demand (COD) mg/l | 15 | 5 | | | | | | |
| Chloride mg/l | 18 | 1.0 | | | | | | |
| Total Organic Carbon mg/l | 5.3 | 1.0 | | | | | | |
| Total Organic Carbon mg/l | 5.5 | 1.0 | | | | | | |
| Total Dissolved Solids (TDS) mg/l | 430 | 10 | | | | | | |
| Iron ug/l | 971 | 30 | | | | | | |
| Sodium ug/l | 12500 | 50 | | | | | | |
| Color, Apparent Co/Pt | < 5 | 5 | | | | | | |
| Odor TON | 4 | | | | | | | |

MAR 21, 196

TABLE 1: MISCELLANEOUS DATA (QR64)

| Chain of Custody Data Required for ETC Data Management Summary Reports | | | | | | |
|--|------------------------|----------|--------------|--------|------|---------------|
| ETC Sample No. | Company | Facility | Sample Point | Date | Time | Elapsed Hours |
| BD4927 | WASTE MANAGEMENT, INC. | 730 | WGD203 | 880303 | 1825 | |

[illegible]

TABLE 1: QUANTITATIVE RESULTS and QUALITY ASSURANCE DATA

Volatile Compounds - GC/MS Analysis Data (QR01)

| Chain of Custody Data Required for ETC Data Management Summary Reports | | | | | | |
|--|------------------------|----------|--------------|--------|------|---------------|
| BD4931 | WASTE MANAGEMENT, INC. | 730 | WGD204 | 880303 | 1145 | |
| ETC Sample No. | Company | Facility | Sample Point | Date | Time | Elapsed Hours |

| DES mber | Compound <small>Acrolein and Acrylonitrile values are screen only.</small> | Results | | QC Replicate | | QC Blank and Spiked Blank | | | QC Matrix Spike | | |
|-------------|---|---------------------------|-------------|---------------|----------------|---------------------------|--------------------------|------------|----------------------------|--------------------------|------------|
| | | Sample Concen. ug/l | MDL ug/l | First ug/l | Second ug/l | Blank Data ug/l | Concen. Added ug/l | % Recov | Unspiked Sample ug/l | Concen. Added ug/l | % Recov |
| 1V | Acrolein | ND | 100 | 86600 | 99600 | ND | 800 | 106 | ND | 80000 | 108 |
| 2V | Acrylonitrile | ND | 100 | 8120 | 8020 | ND | 80.0 | 106 | ND | 8000 | 102 |
| 3V | Benzene | ND | 4.4 | 5050 | 4900 | ND | 50.0 | 98 | ND | 5000 | 101 |
| 4V | bis(Chloromethyl)ether | ND | 10 | ND | ND | ND | 0 | - | ND | 0 | - |
| 5V | Bromoform | ND | 4.7 | 5340 | 5230 | ND | 50.0 | 102 | ND | 5000 | 107 |
| 6V | Carbon tetrachloride | ND | 2.8 | 5080 | 4880 | ND | 50.0 | 96 | ND | 5000 | 102 |
| 7V | Chlorobenzene | ND | 6.0 | 5230 | 5040 | ND | 50.0 | 96 | ND | 5000 | 105 |
| 8V | Chlorodibromomethane | ND | 3.1 | 5180 | 5110 | ND | 50.0 | 102 | ND | 5000 | 104 |
| 9V | Chloroethane | ND | 10 | 4800 | 4830 | ND | 50.0 | 98 | ND | 5000 | 96 |
| 10V | 2-Chloroethylvinyl ether | ND | 10 | 4980 | 4190 | ND | 50.0 | 101 | ND | 5000 | 100 |
| 11V | Chloroform | ND | 1.6 | 5120 | 5170 | ND | 50.0 | 99 | ND | 5000 | 102 |
| 12V | Dichlorobromomethane | ND | 2.2 | 5070 | 5080 | ND | 50.0 | 98 | ND | 5000 | 101 |
| 13V | Dichlorodifluoromethane | ND | 10 | 6500 | 6400 | ND | 50.0 | 65 | ND | 5000 | 130 |
| 14V | 1,1-Dichloroethane | ND | 4.7 | 5150 | 4920 | ND | 50.0 | 100 | ND | 5000 | 103 |
| 15V | 1,2-Dichloroethane | ND | 2.8 | 5150 | 4920 | ND | 50.0 | 98 | ND | 5000 | 103 |
| 16V | 1,1-Dichloroethylene | ND | 2.8 | 5090 | 4870 | ND | 50.0 | 97 | ND | 5000 | 102 |
| 17V | 1,2-Dichloropropane | ND | 6.0 | 5090 | 5150 | ND | 50.0 | 99 | ND | 5000 | 102 |
| 18V | cis-1,3-Dichloropropylene | ND | 5.0 | 5130 | 5040 | ND | 50.0 | 96 | ND | 5000 | 103 |
| 19V | Ethylbenzene | ND | 7.2 | 5200 | 5160 | ND | 50.0 | 97 | ND | 5000 | 104 |
| 20V | Methyl bromide | ND | 10 | 6940 | 16500 | ND | 50.0 | 90 | ND | 5000 | 139 |
| 21V | Methyl chloride | ND | 10 | 4840 | 5290 | ND | 50.0 | 100 | ND | 5000 | 97 |
| 22V | Methylene chloride | ND | 2.8 | 5000 | 4900 | ND | 50.0 | 97 | ND | 5000 | 100 |
| 23V | 1,1,2,2-Tetrachloroethane | ND | 6.9 | 5760 | 5630 | ND | 50.0 | 96 | ND | 5000 | 115 |
| 24V | Tetrachloroethylene | ND | 4.1 | 5210 | 5080 | ND | 50.0 | 96 | ND | 5000 | 104 |
| 25V | Toluene | ND | 6.0 | 5400 | 5280 | ND | 50.0 | 98 | 283 | 5000 | 102 |
| 26V | 1,2-Trans-dichloroethylene | ND | 1.6 | 5110 | 4890 | ND | 50.0 | 99 | ND | 5000 | 102 |
| 27V | 1,1,1-Trichloroethane | ND | 3.8 | 5110 | 4990 | ND | 50.0 | 95 | ND | 5000 | 102 |
| 28V | 1,1,2-Trichloroethane | ND | 5.0 | 5240 | 5210 | ND | 50.0 | 97 | ND | 5000 | 105 |
| 29V | Trichloroethylene | ND | 1.9 | 5020 | 4970 | ND | 50.0 | 98 | ND | 5000 | 100 |
| 30V | Trichlorofluoromethane | ND | 10 | 4890 | 2940 | ND | 50.0 | 99 | ND | 5000 | 98 |
| 31V | Vinyl chloride | ND | 10 | 6210 | 6220 | ND | 50.0 | 78 | ND | 5000 | 124 |
| 18V | trans-1,3-Dichloropropylene | ND | 10 | 5130 | 5040 | ND | 50.0 | 96 | ND | 5000 | 103 |

A Variable replication manually verified.

ETC

ENVIRONMENTAL
TESTING and CERTIFICATION

MAR 21, 1988

TABLE 1: MISCELLANEOUS DATA (QR64)

Chain of Custody Data Required for ETC Data Management Summary Reports

BD4931 WASTE MANAGEMENT, INC.

730

WGD204

880303 1145

ETC Sample No.

Company

Facility

Sample Point

Date

Time

Elapsed
Hours

| Compound | Results | | | | | | | |
|-----------------------------------|-------------------|-----|--|--|--|--|--|--|
| | Sample Concen. | MDL | | | | | | |
| Ammonia as N mg/l | 1.8 | .1 | | | | | | |
| Chemical Oxygen Demand (COD) mg/l | 50 | 5 | | | | | | |
| Chloride mg/l | 610 | 1.0 | | | | | | |
| Total Organic Carbon mg/l | <1.0 | 1.0 | | | | | | |
| Total Organic Carbon mg/l | <1.0 | 1.0 | | | | | | |
| Total Dissolved Solids (TDS) mg/l | 1300 | 10 | | | | | | |
| Iron ug/l | 62 | 30 | | | | | | |
| Sodium ug/l | 412000 | 50 | | | | | | |
| Color, Apparent Co/Pt | 5 | 5 | | | | | | |
| Odor TON | >1024 | | | | | | | |

MAR 11.

ETCENVIRONMENTAL
TESTING and CERTIFICATION

DEC 28, 1987

TABLE 1: QUANTITATIVE RESULTS and QUALITY ASSURANCE DATA**Conventional Analysis Data (QR10)**

Chain of Custody Data Required for ETC Data Management Summary Reports

BC5135 WASTE MANAGEMENT, INC.

730

WGS103

871209 1630

ETC-Sample No.

Company

Facility

Sample Point

Date

Time

Elapsed
Hours

| NPDES Number | Results | | | | | | | | | |
|----------------------------------|-------------------|-----|--|--|--|--|--|--|--|--|
| | Sample Concen. | MDL | | | | | | | | |
| Chloride mg/l | 64 | 1 | | | | | | | | |
| Total Organic Carbon mg/l | 5.9 | 1 | | | | | | | | |
| Total Organic Carbon mg/l | 6.4 | 1 | | | | | | | | |
| Chemical Oxygen Demand (COD)mg/l | <5 | 5 | | | | | | | | |
| Color, Apparent Pt/Co | <5 | 5 | | | | | | | | |
| Odor TON | 2 | | | | | | | | | |
| Total Dissolved Solids (TDS)mg/l | 920 | 10 | | | | | | | | |

ETCENVIRONMENTAL
TESTING and CERTIFICATION

DEC 28, 1987

TABLE 1: QUANTITATIVE RESULTS and QUALITY ASSURANCE DATA**Conventional Analysis Data (QR10)**

Chain of Custody Data Required for ETC Data Management Summary Reports

BC5136 WASTE MANAGEMENT, INC.

730

WGS104

871209 1505

ETC Sample No.

Company

Facility

Sample Point

Date

Time

Elapsed
Hours

| NPDES Number | Results | | | | | | | | | |
|----------------------------------|-------------------|-----|--|--|--|--|--|--|--|--|
| | Sample Concen. | MDL | | | | | | | | |
| Chloride mg/l | 32 | 1 | | | | | | | | |
| Total Organic Carbon mg/l | 4.3 | 1 | | | | | | | | |
| Total Organic Carbon mg/l | 4.9 | 1 | | | | | | | | |
| Chemical Oxygen Demand (COD)mg/l | <5 | 5 | | | | | | | | |
| Color, Apparent Pt/Co | <5 | 5 | | | | | | | | |
| Odor TON | 2 | | | | | | | | | |
| Total Dissolved Solids (TDS)mg/l | 480 | 10 | | | | | | | | |

ETCENVIRONMENTAL
TESTING and CERTIFICATION

DEC 28, 1987

TABLE 1: QUANTITATIVE RESULTS and QUALITY ASSURANCE DATA**Conventional Analysis Data (QR10)**

Chain of Custody Data Required for ETC Data Management Summary Reports

BC5129 WASTE MANAGEMENT, INC.

730

WGD203

871209 1620

ETC Sample No.

Company

Facility

Sample Point

Date

Time

Elapsed
Hours

| NPDES Number | Results | | | | | | | | |
|-----------------------------------|-------------------|-----|--|--|--|--|--|--|--|
| | Sample Concen. | MDL | | | | | | | |
| Chloride mg/l | 220 | 1 | | | | | | | |
| Total Organic Carbon mg/l | <1 | 1 | | | | | | | |
| Total Organic Carbon mg/l | <1 | 1 | | | | | | | |
| Chemical Oxygen Demand (COD) mg/l | <5 | 5 | | | | | | | |
| Color, Apparent Pt/Co | <5 | 5 | | | | | | | |
| Odor TON | >1024 | | | | | | | | |
| Total Dissolved Solids (TDS) mg/l | 680 | 10 | | | | | | | |

ETCENVIRONMENTAL
TESTING and CERTIFICATION

DEC 28, 1987

TABLE 1: QUANTITATIVE RESULTS and QUALITY ASSURANCE DATA**Conventional Analysis Data (QR10)**

Chain of Custody Data Required for ETC Data Management Summary Reports

BC5130 WASTE MANAGEMENT, INC.

730

WGD204

871209 1450

ETC Sample No.

Company

Facility

Sample Point

Date

Time

Elapsed
Hours

| NPDES Number | Results | | | | | | | | | |
|----------------------------------|-------------------|-----|--|--|--|--|--|--|--|--|
| | Sample Concen. | MDL | | | | | | | | |
| Chloride mg/l | 640 | 1 | | | | | | | | |
| Total Organic Carbon mg/l | <1 | 1 | | | | | | | | |
| Total Organic Carbon mg/l | <1 | 1 | | | | | | | | |
| Chemical Oxygen Demand (COD)mg/l | 25 | 5 | | | | | | | | |
| Color, Apparent Pt/Co | 5 | 5 | | | | | | | | |
| Odor TON | >1024 | | | | | | | | | |
| Total Dissolved Solids (TDS)mg/l | 1400 | 10 | | | | | | | | |

ETC

ENVIRONMENTAL
TESTING and CERTIFICATION

OCT 12, 1987

TABLE 1: QUANTITATIVE RESULTS and QUALITY ASSURANCE DATA

Ground Water Monitoring Metals (QR41)

Chain of Custody Data Required for ETC Data Management Summary Reports

BB8251 WASTE MANAGEMENT, INC.

730

WGS103

870903 1205

ETC Sample No.

Company

Facility

Sample Point

Date

Time

Elapsed
Hours

| Compound | Results | | | | | | | |
|-----------|---------------------------|-------------|--|--|--|--|--|--|
| | Sample Concen. ug/l | MDL ug/l | | | | | | |
| Arsenic | 12 | 4 | | | | | | |
| Barium | 261 | 50 | | | | | | |
| Cadmium | <4 | 4 | | | | | | |
| Chromium | <20 | 20 | | | | | | |
| Lead | 24 | 4 | | | | | | |
| Mercury | <.5 | .5 | | | | | | |
| Selenium | <2 | 2 | | | | | | |
| Silver | <30 | 30 | | | | | | |
| Iron | 2690 | 30 | | | | | | |
| Manganese | 1080 | 10 | | | | | | |
| Sodium | 29000 | 50 | | | | | | |

OCT 24, 1987

TABLE 1: QUANTITATIVE RESULTS and QUALITY ASSURANCE DATA

Conventional Analysis Data (QR10)

Chain of Custody Data Required for ETC Data Management Summary Reports

BB8251 WASTE MANAGEMENT, INC. 730 WGS103 870903 1205

ETC Sample No. Company Facility Sample Point Date Time Elapsed Hours

| NPDES Number | Results | | | | | | | | | |
|-----------------------------------|-------------------|------|--|--|--|--|--|--|--|--|
| | Sample Concen. | MDL | | | | | | | | |
| Chloride mg/l | 61 | 1 | | | | | | | | |
| Fluoride mg/l | .28 | .1 | | | | | | | | |
| Nitrate as N mg/l | < .1 | .1 | | | | | | | | |
| Sulfate as SO ₄ mg/l | 140 | 10 | | | | | | | | |
| Phenolics, Total mg/l | < .005 | .005 | | | | | | | | |
| Cyanide, Total mg/l | < .02 | .02 | | | | | | | | |
| Total Organic Halides (TOX) ug/l | < 5 | 5 | | | | | | | | |
| Total Organic Halides (TOX) ug/l | < 5 | 5 | | | | | | | | |
| Total Organic Carbon mg/l | 11 | 1 | | | | | | | | |
| Total Organic Carbon mg/l | 12 | 1 | | | | | | | | |
| Gross Alpha pCi/l | 9.9 | | | | | | | | | |
| Gross Alpha pCi/l | 11.0 | | | | | | | | | |
| Gross Beta pCi/l | 10.0 | | | | | | | | | |
| Gross Beta pCi/l | +/- 9.0 | | | | | | | | | |
| Ammonia as N mg/l | < .1 | .1 | | | | | | | | |
| Chemical Oxygen Demand (COD) mg/l | 31 | 5 | | | | | | | | |
| Color, Apparent Co/Pt | < 5 | 5 | | | | | | | | |
| Fecal Coliform C/100 | 23 | 2 | | | | | | | | |
| Odor TON | 0 | | | | | | | | | |
| Total Dissolved Solids (TDS) mg/l | 990 | 10 | | | | | | | | |

OCT 15 1987

57

JR

ENVIRONMENTAL TESTING and CERTIFICATION

ETC JOB #

88251

FIELD PARAMETER FORM (CC2)

Sample Point

Source Code

Sample Point ID

FIELD PROCEDURES

870903

PURGE DATE
(YY MM DD)

111405

START PURGE 4-3-87
(2400 Hr Clock)

0.4

ELAPSED HRS

4.33

WATER VOL IN CASING
(Gallons)

13

VOLUME PURGED
(Gallons)

SAMPLING METHOD:

Sampler Type

C

A-Submersible Pump
B-ISCO
C-Bladder PumpD-Dipper/Bottle
E-Bailer
F-Scoop/Shovel

X-Other

WELL WIZARD
(SPECIFY OTHER)

Sampler Material

X

A-Teflon
B-MetalC-PVC
D-Plastic

X-Other

STAINLESS STEEL/TEFLON
(SPECIFY OTHER)

Tubing Material

A

A-Teflon
B-TygonC-Polyethylene
D-Silicon

X-Other

(SPECIFY OTHER)

Sample Compositing

Y

Procedure/Proportions

FIELD MEASUREMENTS

Well Elevation (ft/msl)

* 459.93

Well Depth (ft)

* 31.87

Depth to Ground water (ft)

5.33

Sample Depth (non-well) (ft)

Groundwater Elevation (ft msl)

454.60

1st

6.72

(STD)

ph

1st

1360

spec. cond.

um/cm
at 25°C

STICK UP

(other parameter)

2.37

value

FT

units

2nd

(STD)

ph

2nd

spec. cond.

um/cm
at 25°C

(other parameter)

value

units

3rd

(STD)

ph

3rd

spec. cond.

um/cm
at 25°C

(other parameter)

value

units

4th

(STD)

ph

4th

spec. cond.

um/cm
at 25°C

(other parameter)

value

units

17.0

(°C)

Sample Temp

Turbidity

NTU

FIELD COMMENTS

Sample Appearance: GRAYISH TAN TINT, TURBID, NO ODOOR

Weather Conditions: SUNNY ~75°F, WINDS LIGHT AND VARIABLE

Other: M.P. = W.W. CAP * REFERENCE MEASUREMENT.

HEAVY TRAFFIC ~150 FT WEST OF WELL.

$$31.87 - 5.33 = 26.54 \times .163 = 4.33 \times 3 = 12.98$$

FILTERING: Use Chain of Custody (CC1) to indicate which bottles were filtered

Sampler:

JAMES A. O'MALLEY

Employer:

GCL

I certify that sampling procedures were in accordance with applicable EPA state and corporate protocols.

9-3-87

(Date)

James A. O'Malley

(Signature)

ORIGINAL



ENVIRONMENTAL
TESTING AND CERTIFICATION

OCT 10 1997

TABLE 1: QUANTITATIVE RESULTS and QUALITY ASSURANCE DATA

Ground Water Monitoring Metals (QR41)

Chain of Custody Data Required for ETC Data Management Summary Reports

BB6254 WASTE MANAGEMENT, INC

730

WGS104

870903 1020

ETC Sample No.

Company

Location

Date

Time

Depth

Remarks

| Compound | Results | | | | |
|-----------|--------------------------|-------------|--|--|--|
| | Sample Concn. ug/l | MDL ug/l | | | |
| Arsenic | 6 | 4 | | | |
| Barium | 113 | 50 | | | |
| Cadmium | 4 | 4 | | | |
| Chromium | <20 | 20 | | | |
| Lead | 80 | 4 | | | |
| Mercury | .5 | .5 | | | |
| Selenium | 42 | 2 | | | |
| Silver | <30 | 30 | | | |
| Iron | 2530 | 30 | | | |
| Manganese | 549 | 10 | | | |
| Sodium | 18100 | 50 | | | |

OCT 24, 1987

TABLE 1: QUANTITATIVE RESULTS and QUALITY ASSURANCE DATA

Conventional Analysis Data (QR10)

Chain of Custody Data Required for ETC Data Management Summary Reports

BB8254 WASTE MANAGEMENT, INC.

730

WGS104

870903 1020

ETC Sample No.

Company

Facility

Sample Point

Date

Time

Elapsed
Hours

| NPDES Number | Results | | | | | | | | | | |
|------------------------------|-------------------|--------|------|--|--|--|--|--|--|--|--|
| | Sample Concen. | MDL | | | | | | | | | |
| Chloride | mg/l | 21 | 1 | | | | | | | | |
| Fluoride | mg/l | .33 | .1 | | | | | | | | |
| Nitrate as N | mg/l | < .1 | .1 | | | | | | | | |
| Sulfate as SO ₄ | mg/l | 92 | 10 | | | | | | | | |
| Phenolics, Total | mg/l | < .005 | .005 | | | | | | | | |
| Cyanide, Total | mg/l | < .02 | .02 | | | | | | | | |
| Total Organic Halides (TOX) | ug/l | 13 | 5 | | | | | | | | |
| Total Organic Halides (TOX) | ug/l | 18 | 5 | | | | | | | | |
| Total Organic Carbon | mg/l | 4.5 | 1 | | | | | | | | |
| Total Organic Carbon | mg/l | 4.6 | 1 | | | | | | | | |
| Gross Alpha | pCi/l | 13.0 | | | | | | | | | |
| Gross Alpha | pCi/l | 7.2 | | | | | | | | | |
| Gross Beta | pCi/l | 12.0 | | | | | | | | | |
| Gross Beta | pCi/l | +/-5.5 | | | | | | | | | |
| Ammonia as N | mg/l | < .1 | .1 | | | | | | | | |
| Chemical Oxygen Demand (COD) | mg/l | 10 | 5 | | | | | | | | |
| Color, Apparent | Co/Pt | 5 | 5 | | | | | | | | |
| Fecal Coliform | C/100 | 8 | 2 | | | | | | | | |
| Odor | TON | 0 | | | | | | | | | |
| Total Dissolved Solids (TDS) | mg/l | 560 | 10 | | | | | | | | |

4

TR

ENVIRONMENTAL TESTING and CERTIFICATION

ETC JOB #

88254

FIELD PARAMETER FORM (CC2)

Sample Point

W 65104

Source Code

Sample Point ID

FIELD PROCEDURES

870903

PURGE DATE
(YY MM DD)

0900

START PURGE
(2400 Hr Clock)

1.1

ELAPSED HRS

10.69

WATER VOL IN CASING
(Gallons)

33

VOLUME PURGED
(Gallons)

SAMPLING METHOD:

Sampler Type

C

A-Submersible Pump

B-ISCO

C-Bladder Pump

D-Dipper/Bottle

E-Bailer

F-Scoop/Shovel

X-Other

WELL WIZARD

(SPECIFY OTHER)

Sampler Material

X

A-Teflon

B-Metal

C-PVC

D-Plastic

X-Other

STAINLESS STEEL TEFLON

(SPECIFY OTHER)

Tubing Material

A

A-Teflon

B-Tygon

C-Polyethylene

D-Silicon

X-Other

(SPECIFY OTHER)

Sample Composited

Y/N

Procedure/Proportions

FIELD MEASUREMENTS

Well Elevation (ft/msl)

* 457.20

Well Depth (ft)

* 26.37

Depth to Ground water (ft)

10.00

Sample Depth (non-well) (ft)

1.00

Groundwater Elevation (ft msl)

447.20

1st 6.98 (STD)

ph

1st 814

spec. cond.

um/cm
at 25°C

STICK UP

(other parameter)

1.96

value

ET

units

2nd (STD)

ph

2nd

spec. cond.

um/cm
at 25°C

(other parameter)

value

value

units

3rd (STD)

ph

3rd

spec. cond.

um/cm
at 25°C

(other parameter)

value

value

units

4th (STD)

ph

4th

spec. cond.

um/cm
at 25°C

(other parameter)

value

value

units

14.4 (°C)

Sample Temp

NTU

Turbidity

FIELD COMMENTS

Sample Appearance: CLEAR, NO ODOR

Weather Conditions: MOSTLY SUNNY, 26.5°F, WINDS LIGHT AND VARIABLE

Other: MIP = WIN CAP. * REFERENCE MEASUREMENT.

$$26.37 - 10 = 16.37 \times .653 = 10.69 \times 3 = 32.07$$

FILTERING: Use Chain of Custody (CC1) to indicate which bottles were filtered

Sampler:

JAMES A. O'MALLEY

Employer:

GCL

I certify that sampling procedures were in accordance with applicable EPA state and corporate protocols.

9-3-87

(Date)

(Signature)

James A. O'Malley

ORIGINAL

ETCENVIRONMENTAL
TESTING and CERTIFICATION

OCT 13, 1987

TABLE 1: QUANTITATIVE RESULTS and QUALITY ASSURANCE DATA**Ground Water Monitoring Metals (QR41)**

Chain of Custody Data Required for ETC Data Management Summary Reports

BB8252 WASTE MANAGEMENT, INC.

730

WGD203

870903 1255

ETC Sample No.

Company

Facility

Sample Point

Date

Time

Elapsed
Hours

| Compound | Results | | | | | | | | | |
|-----------|---------------------------|-------------|--|--|--|--|--|--|--|--|
| | Sample Concen. ug/l | MDL ug/l | | | | | | | | |
| Arsenic | <4 | 4 | | | | | | | | |
| Barium | 635 | 50 | | | | | | | | |
| Cadmium | <4 | 4 | | | | | | | | |
| Chromium | <20 | 20 | | | | | | | | |
| Lead | <10 | 10 | | | | | | | | |
| Mercury | <.5 | .5 | | | | | | | | |
| Selenium | <2 | 2 | | | | | | | | |
| Silver | <30 | 30 | | | | | | | | |
| Iron | <30 | 30 | | | | | | | | |
| Manganese | <10 | 10 | | | | | | | | |
| Sodium | 234000 | 50 | | | | | | | | |

OCT 24, 1987

| Metric / Test Case | Baseline Accuracy (%) | Proposed Method Accuracy (%) | Improvement (%) | Quality Assurance Score (0-1) |
|---|-----------------------|------------------------------|-----------------|-------------------------------|
| Image Classification (CIFAR-10) | 85.2 | 92.5 | +7.3 | 0.95 |
| Image Classification (ImageNet) | 76.8 | 84.1 | +7.3 | 0.92 |
| Object Detection (COCO) | 38.5 | 45.2 | +6.7 | 0.88 |
| Semantic Segmentation (PASCAL3D+) | 62.1 | 68.9 | +6.8 | 0.91 |
| Video Action Recognition (Kinetics-400) | 72.3 | 78.6 | +6.3 | 0.89 |
| Audio Classification (LibriSpeech) | 88.9 | 91.2 | +2.3 | 0.96 |
| NLP Sentiment Analysis (IMDb) | 82.1 | 85.4 | +3.3 | 0.93 |
| NLP Machine Translation (WMT14 En-Fr) | 65.7 | 69.8 | +4.1 | 0.90 |
| Robotics Navigation (RoboBench) | 55.3 | 61.7 | +6.4 | 0.87 |
| Healthcare Image Analysis (MIDAS) | 78.4 | 83.2 | +4.8 | 0.94 |
| Average Performance | 74.5 | 80.8 | +6.3 | 0.91 |

Conventional Analysis Data (QR10)

| Chain of Custody Data Required for ETC Data Management Summary Reports | | | | | | |
|--|------------------------|----------|--------------|--------|------|---------------|
| ETC Sample No. | Company | Facility | Sample Point | Date | Time | Elapsed Hours |
| BB8252 | WASTE MANAGEMENT, INC. | 730 | WGD203 | 870903 | 1255 | |

| NPDES Number | Results | | | | | | | | |
|------------------------------|-------------------|--------|------|--|--|--|--|--|--|
| | Sample Concen. | MDL | | | | | | | |
| Chloride | mg/l | 210 | 1 | | | | | | |
| Fluoride | mg/l | 1.8 | .1 | | | | | | |
| Nitrate as N | mg/l | <.1 | .1 | | | | | | |
| Sulfate as SO4 | mg/l | 19 | 10 | | | | | | |
| Phenolics, Total | mg/l | .007 | .005 | | | | | | |
| Cyanide, Total | mg/l | <.02 | .02 | | | | | | |
| Total Organic Halides (TOX) | ug/l | <5 | 5 | | | | | | |
| Total Organic Halides (TOX) | ug/l | <5 | 5 | | | | | | |
| Total Organic Carbon | mg/l | 3.1 | 1 | | | | | | |
| Total Organic Carbon | mg/l | 3.1 | 1 | | | | | | |
| Gross Alpha | pCi/l | <3.4 | | | | | | | |
| Gross Beta | pCi/l | .1 | | | | | | | |
| Gross Beta | pCi/l | +/-6.9 | | | | | | | |
| Ammonia as N | mg/l | 1.2 | .1 | | | | | | |
| Chemical Oxygen Demand (COD) | mg/l | 8 | 5 | | | | | | |
| Color, Apparent | Co/Pt | <5 | 5 | | | | | | |
| Fecal Coliform | C/100 | <2 | 2 | | | | | | |
| Odor | TON | >1024 | | | | | | | |
| Total Dissolved Solids (TDS) | mg/l | 700 | 10 | | | | | | |

FIELD PARAMETER FORM (CC2)

ETC JOB #

BB8252

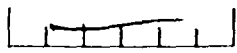
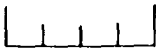
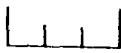
Sample Point

W 60203

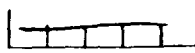
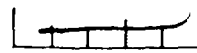
Source Code

Sample Point I.D.

FIELD PROCEDURES

PURGE DATE
(YY MM DD)START PURGE
(2400 Hr Clock)

ELAPSED HRS

WATER VOL IN CASING
(Gallons)VOLUME PURGED
(Gallons)

SAMPLING METHOD:

Sampler Type

A-Submersible Pump
B-ISCO
C-Bladder PumpD-Dipper/Bottle
E-Bailer
F-Scoop/Shovel

X-Other

4"

(SPECIFY OTHER)

Sampler Material

A-Teflon
B-MetalC-PVC
D-Plastic

X-Other

(SPECIFY OTHER)

Tubing Material

A-Teflon
B-TygonC-Polyethylene
D-Silicon

X-Other

(SPECIFY OTHER)

Sample Compositing



Procedure/Proportions

FIELD MEASUREMENTS

Well Elevation (ft/msl)

* 470.61

Well Depth (ft)

* 184.08

Depth to Ground water (ft)

0.00

Sample Depth (non-well) (ft)

0.00

Groundwater Elevation (ft msl)

470.61

1st 7.52 (STD)

ph

1st 112.80

spec. cond.

um/cm
at 25 °C

Stick Up

(other parameter)

4.75

value

units

2nd (STD)

ph

2nd

spec. cond.

um/cm
at 25 °C

(other parameter)

value

value

units

3rd (STD)

ph

3rd

spec. cond.

um/cm
at 25 °C

(other parameter)

value

value

units

4th (STD)

ph

4th

spec. cond.

um/cm
at 25 °C

(other parameter)

value

value

units

15.9 (°C)

Sample Temp

NTU

Turbidity

FIELD COMMENTS

Sample Appearance:

CLEAR, SMALL BLACK PARTICLES IN H₂O, DOOR PRESENT (ROTEN EGGS)

Weather Conditions:

SUNNY, ~80°F, WINDS LIGHT AND VARIABLE

Other:

W.P. = T.O.C. * REFERENCE MEASUREMENT.

WELL IS CONSTANTLY FLOWING, NO CALCULATIONS WERE MADE DUE TO THIS FACT. REMOVED 50 GALLONS TO IMPROVE INTEGRITY OF SAMPLE.

FILTERING: Use Chain of Custody (CC1) to indicate which bottles were filtered

Sampler:

JAMES A. O'MALLEY

Employer:

GCL

I certify that sampling procedures were in accordance with applicable EPA state and corporate protocols.

9-3-82

James A. O'Malley

(Date)

(Signature)

ORIGINAL

OCT 12, 1987

TABLE 1: QUANTITATIVE RESULTS and QUALITY ASSURANCE DATA

Ground Water Monitoring Metals (QR41)

Chain of Custody Data Required for ETC Data Management Summary Reports

BB8253 WASTE MANAGEMENT, INC.

730

WGD204

870903 1000

ETC Sample No.

Company

Facility

Sample Point

Date

Time

Elapsed
Hours

| Compound | Results | | | | | | | |
|-----------|---------------------------|-------------|--|--|--|--|--|--|
| | Sample Concen. ug/l | MDL ug/l | | | | | | |
| Arsenic | <4 | 4 | | | | | | |
| Barium | 3670 | 50 | | | | | | |
| Cadmium | <4 | 4 | | | | | | |
| Chromium | <20 | 20 | | | | | | |
| Lead | 12 | 4 | | | | | | |
| Mercury | <.5 | .5 | | | | | | |
| Selenium | <2 | 2 | | | | | | |
| Silver | <30 | 30 | | | | | | |
| Iron | 36 | 30 | | | | | | |
| Manganese | <10 | 10 | | | | | | |
| Sodium | 398000 | 50 | | | | | | |

OCT 24, 1987

TABLE 1: QUANTITATIVE RESULTS and QUALITY ASSURANCE DATA

Conventional Analysis Data (QR10)

Chain of Custody Data Required for ETC Data Management Summary Reports

BB8253 WASTE MANAGEMENT, INC. 730 WGD204 870903 1000

ETC Sample No. Company Facility Sample Point Date Time Elapsed Hours

| NPDES Number | Results | | | | | | | | | |
|------------------------------|-------------------|---------|------|--|--|--|--|--|--|--|
| | Sample Concen. | MDL | | | | | | | | |
| Chloride | mg/l | 610 | 1 | | | | | | | |
| Fluoride | mg/l | 1.9 | .1 | | | | | | | |
| Nitrate as N | mg/l | < .1 | .1 | | | | | | | |
| Sulfate as SO ₄ | mg/l | 40 | 10 | | | | | | | |
| Phenolics, Total | mg/l | .035 | .005 | | | | | | | |
| Cyanide, Total | mg/l | < .02 | .02 | | | | | | | |
| Total Organic Halides (TOX) | ug/l | 8 | 5 | | | | | | | |
| Total Organic Halides (TOX) | ug/l | 12 | 5 | | | | | | | |
| Total Organic Carbon | mg/l | 2.1 | 1 | | | | | | | |
| Total Organic Carbon | mg/l | 2.1 | 1 | | | | | | | |
| Gross Alpha | pCi/l | 14.0 | | | | | | | | |
| Gross Alpha | pCi/l | 22.0 | | | | | | | | |
| Gross Beta | pCi/l | 9.5 | | | | | | | | |
| Gross Beta | pCi/l | +/-16.0 | | | | | | | | |
| Ammonia as N | mg/l | 1.7 | .1 | | | | | | | |
| Chemical Oxygen Demand (COD) | mg/l | <5 | 5 | | | | | | | |
| Color, Apparent | Co/Pt | <5 | 5 | | | | | | | |
| Fecal Coliform | C/100 | BMDL | 2 | | | | | | | |
| Odor | TON | >1024 | | | | | | | | |
| Total Dissolved Solids (TDS) | mg/l | 1400 | 10 | | | | | | | |

3
TK



FIELD PARAMETER FORM (CC2)

ETC JOB #

8253

Sample Point

W

GD204

Source Code

Sample Point ID

FIELD PROCEDURES

070903

PURGE DATE
(YY MM DD)

0840

START PURGE
(2400 Hr Clock)

1.4

ELAPSED HRS

55.80

WATER VOL IN CASING
(Gallons)

168

VOLUME PURGED
(Gallons)

SAMPLING METHOD:

Sampler Type

C

A-Submersible Pump
B-ISCO
C-Bladder Pump

D-Dipper/Bottle
E-Bailer
F-Scoop/Shovel

X-Other

WELL WIZARD
(SPECIFY OTHER)

Sampler Material

X

A-Teflon
B-Metal

C-PVC
D-Plastic

X-Other

STAINLESS STEEL / TEFALON
(SPECIFY OTHER)

Tubing Material

A

A-Teflon
B-Tygon

C-Polyethylene
D-Silicon

X-Other

(SPECIFY OTHER)

Sample Compositing

YN

Procedure/Proportions

FIELD MEASUREMENTS

Well Elevation (ft/msl)

* 457.07

Well Depth (ft)

* 91.25

Depth to Ground water (ft)

5.79

Sample Depth (non-well) (ft)

Groundwater Elevation (ft msl)

451.28

1st 7.15 (STD)

ph

1st 2580

spec. cond.

um/cm
at 25°C

STICK UP

(other parameter)

2.25

value

FT
units

2nd (STD)

ph

2nd 2

spec. cond.

um/cm
at 25°C

(other parameter)

value

units

3rd (STD)

ph

3rd

spec. cond.

um/cm
at 25°C

(other parameter)

value

units

4th (STD)

ph

4th

spec. cond.

um/cm
at 25°C

(other parameter)

value

units

14.1 (°C)

Sample Temp

Turbidity

NTU

FIELD COMMENTS

Sample Appearance: CLEAR, MODERATE ODOR (ROTTEN EGGS)

Weather Conditions: PARTLY SUNNY, ~65°F, WINDS LIGHT AND VARIABLE

Other: M.P. = F.O.G. 9-3-87 = W.W. CAP. * REFERENCE MEASUREMENT.

RE STANDARDIZED PH AND SC METERS AT 1000.

DUPLICATE READINGS: PH 7.27 SC 2580 TEMP. 14.4°C

91.25 - 5.79 = 85.46 x 1.63 = 55.80 x 3 = 167.42

FILTERING: Use Chain of Custody (CC1) to indicate which bottles were filtered

Sampler:

(Print)

JAMES A. O'MALLEY

Employer:

GCL

I certify that sampling procedures were in accordance with applicable EPA state and corporate protocols.

9-3-87

(Date)

(Signature)

James A. O'Malley

ORIGINAL

JUN 25, 1987

TABLE 1: QUANTITATIVE RESULTS and QUALITY ASSURANCE DATA

Conventional Analysis Data (QR10)

Chain of Custody Data Required for ETC Data Management Summary Reports

BA2706 WASTE MANAGEMENT, INC.

730

WGS103

870603 1140

ETC Sample No.

Company

Facility

Sample Point

Date

Time

Elapsed
Hours

| NPDES Number | Results | | | | | | | | | |
|-----------------------------------|-------------------|-----|--|--|--|--|--|--|--|--|
| | Sample Concen. | MDL | | | | | | | | |
| Chloride mg/l | 58.0 | 1.0 | | | | | | | | |
| Total Organic Carbon mg/l | 4.90 | 1.0 | | | | | | | | |
| Total Organic Carbon mg/l | 4.90 | 1.0 | | | | | | | | |
| Chemical Oxygen Demand (COD) mg/l | 11.0 | 5.0 | | | | | | | | |
| Color, Apparent Pt/Co | <5.00 | 5.0 | | | | | | | | |
| Odor TON | 0 | | | | | | | | | |
| Total Dissolved Solids (TDS) mg/l | 920 | 10 | | | | | | | | |

JUN 26, 1987

TABLE 1: QUANTITATIVE RESULTS and QUALITY ASSURANCE DATA

Conventional Analysis Data (QR10)

Chain of Custody Data Required for ETC Data Management Summary Reports

BA2707 WASTE MANAGEMENT, INC. 730 WGS104 870604 15:15
 ETC Sample No. Company Facility Sample Point Date Time Sealed
 Hours

| NPDES Number | Results | | | | | | | | | |
|-----------------------------------|-------------------|-----|--|--|--|--|--|--|--|--|
| | Sample Concen. | MDL | | | | | | | | |
| Chloride mg/l | 17.0 | 1.0 | | | | | | | | |
| Total Organic Carbon mg/l | 4.90 | 1.0 | | | | | | | | |
| Total Organic Carbon mg/l | 5.20 | 1.0 | | | | | | | | |
| Chemical Oxygen Demand (COD) mg/l | 10.0 | 5.0 | | | | | | | | |
| Color, Apparent Co/Pt | 5.00 | 5.0 | | | | | | | | |
| Odor TON | 1 | | | | | | | | | |
| Total Dissolved Solids (TDS) mg/l | 470 | 10 | | | | | | | | |

JUN 25, 1987

TABLE 1: QUANTITATIVE RESULTS and QUALITY ASSURANCE DATA
Conventional Analysis Data (QR10)

Chain of Custody Data Required for ETC Data Management Summary Reports

BA2712 WASTE MANAGEMENT, INC.

730

WGD203

870603 1615

ETC Sample No.

Company

Facility

Sample Point

Date

Time

Elapsed
Hours

| NPDES Number | Results | | | | | | | | | |
|-----------------------------------|-------------------|-----|--|--|--|--|--|--|--|--|
| | Sample Concen. | MDL | | | | | | | | |
| Chloride mg/l | 210 | 1.0 | | | | | | | | |
| Total Organic Carbon mg/l | 1.10 | 1.0 | | | | | | | | |
| Total Organic Carbon mg/l | 1.30 | 1.0 | | | | | | | | |
| Chemical Oxygen Demand (COD) mg/l | 12.0 | 5.0 | | | | | | | | |
| Color, Apparent Pt/Co | <5.00 | 5.0 | | | | | | | | |
| Odor TON | >1020 | | | | | | | | | |
| Total Dissolved Solids (TDS) mg/l | 740 | 10 | | | | | | | | |

JUN 25, 1987

TABLE 1: QUANTITATIVE RESULTS and QUALITY ASSURANCE DATA

Conventional Analysis Data (QR10)

Chain of Custody Data Required for ETC Data Management Summary Reports

BA2713 WASTE MANAGEMENT, INC.

730

WGD204

870604 1515

ETC Sample No.

Company

Facility

Sample Point

Date

Time

Elapsed
Hours

| NPDES Number | Results | | | | | | | | | |
|-----------------------------------|-------------------|-----|--|--|--|--|--|--|--|--|
| | Sample Concen. | MDL | | | | | | | | |
| Chloride mg/l | 630 | 1.0 | | | | | | | | |
| Total Organic Carbon mg/l | <1.00 | 1.0 | | | | | | | | |
| Total Organic Carbon mg/l | <1.00 | 1.0 | | | | | | | | |
| Chemical Oxygen Demand (COD) mg/l | 53.0 | 5.0 | | | | | | | | |
| Color, Apparent Pt/Co | <5.00 | 5.0 | | | | | | | | |
| Odor TON | >1020 | | | | | | | | | |
| Total Dissolved Solids (TDS) mg/l | 1400 | 10 | | | | | | | | |

Conventional Analysis Data (QR10)

| Chain of Custody Data Required for ETC Data Management Summary Reports | | | | | | |
|--|------------------------|----------|--------------|--------|------|---------------|
| ETC Sample No. | Company | Facility | Sample Point | Date | Time | Elapsed Hours |
| R7270 | WASTE MANAGEMENT, INC. | 730 | WGS104 | 870303 | 1615 | |

| NPDES Number | Results | | | | | | | | |
|------------------------------|-------------------|-----|-----|--|--|--|--|--|--|
| | Sample Concen. | MDL | | | | | | | |
| Chloride | mg/l | 11 | 1 | | | | | | |
| Total Organic Carbon | mg/l | 37 | 1.0 | | | | | | |
| Total Organic Carbon | mg/l | 38 | 1.0 | | | | | | |
| Chemical Oxygen Demand (COD) | mg/l | 14 | 5 | | | | | | |
| Color, Apparent | CU | 10 | 5 | | | | | | |
| Odor | TON | 1 | | | | | | | |
| Total Dissolved Solids (TDS) | mg/l | 370 | 10 | | | | | | |



MAR 18, 1987

TABLE 1: QUANTITATIVE RESULTS and QUALITY ASSURANCE DATA

Conventional Analysis Data (QR10)

Chain of Custody Data Required for ETC Data Management Summary Reports

R7266 WASTE MANAGEMENT, INC. 730 WGD203 870303 1740

ETC Sample No. Company Facility Sample Point Date Time Elapsed Hours

| RPDES Number | Results | | | | | | | | | |
|----------------------------------|-------------------|-----|--|--|--|--|--|--|--|--|
| | Sample Concen. | MDL | | | | | | | | |
| Chloride mg/l | 320 | 1 | | | | | | | | |
| Total Organic Carbon mg/l | 31 | 1.0 | | | | | | | | |
| Total Organic Carbon mg/l | 32 | 1.0 | | | | | | | | |
| Chemical Oxygen Demand (COD)mg/l | 17 | 5 | | | | | | | | |
| Color, Apparent CU | <5 | 5 | | | | | | | | |
| Odor TON | >1024 | | | | | | | | | |
| Total Dissolved Solids (TDS)mg/l | 700 | 10 | | | | | | | | |

TABLE 1: QUANTITATIVE RESULTS and QUALITY ASSURANCE DATA

Conventional Analysis Data (QR10)

Chain of Custody Data Required for ETC Data Management Summary Reports

R7278 WASTE MANAGEMENT, INC. 730 WGD204 870303 1800
 ETC Sample No. Company Facility Sample Point Date Time Elapsed Hours

| NPDES Number | Results | | | | | | | | | |
|-----------------------------------|-------------------|-----|--|--|--|--|--|--|--|--|
| | Sample Concen. | MDL | | | | | | | | |
| Chloride mg/l | 640 | 1 | | | | | | | | |
| Total Organic Carbon mg/l | 29 | 1.0 | | | | | | | | |
| Total Organic Carbon mg/l | 28 | 1.0 | | | | | | | | |
| Chemical Oxygen Demand (COD) mg/l | 45 | 5 | | | | | | | | |
| Color, Apparent CU | <5 | 5 | | | | | | | | |
| Odor TON | >1024 | | | | | | | | | |
| Total Dissolved Solids (TDS) mg/l | 1300 | 10 | | | | | | | | |

TABLE 1: QUANTITATIVE RESULTS and QUALITY ASSURANCE DATA

Volatile Compounds - GC/MS Analysis Data (QR01)

Chain of Custody Data Required for ETC Data Management Summary Reports

| | | | | | |
|----------------|------------------------|----------|--------------|--------|--------------------|
| R7278 | WASTE MANAGEMENT, INC. | 730 | WGD204 | 870303 | 1800 |
| ETC Sample No. | Company | Facility | Sample Point | Date | Time Elapsed Hours |

| NPDES Number | Compound <small>Acrolein and Acrylonitrile values are screen only.</small> | Results | | QC Replicate | | QC Blank and Spiked Blank | | | QC Matrix Spike | | |
|---------------------------------|---|---------------------------|-------------|---------------|----------------|---------------------------|--------------------------|------------|----------------------------|--------------------------|------------|
| | | Sample Concen. ug/l | MDL ug/l | First ug/l | Second ug/l | Blank Data ug/l | Concen. Added ug/l | % Recov | Unspiked Sample ug/l | Concen. Added ug/l | % Recov |
| 1V Acrolein | | ND | 100 | ND | ND | ND | 800 | 102 | ND | 800 | 78 |
| 2V Acrylonitrile | | ND | 100 | ND | ND | ND | 80.0 | 123 | ND | 80.0 | 91 |
| 3V Benzene | | ND | 4.4 | ND | ND | ND | 18.0 | 96 | ND | 18.0 | 100 |
| 4V bis(Chloromethyl)ether | | ND | 10 | ND | ND | ND | 0 | - | ND | 0 | - |
| 5V Bromoform | | ND | 4.7 | ND | ND | ND | 18.0 | 96 | ND | 18.0 | 101 |
| 6V Carbon tetrachloride | | ND | 2.8 | ND | ND | ND | 18.0 | 101 | ND | 18.0 | 103 |
| 7V Chlorobenzene | | ND | 6.0 | ND | ND | ND | 18.0 | 99 | ND | 18.0 | 102 |
| 8V Chlorodibromomethane | | ND | 3.1 | ND | ND | ND | 18.0 | 100 | ND | 18.0 | 106 |
| 9V Chloroethane | | ND | 10 | ND | ND | ND | 18.0 | 106 | ND | 18.0 | 74 |
| 10V 2-Chloroethylvinyl ether | | ND | 10 | ND | ND | ND | 18.0 | 0. | ND | 18.0 | 0. |
| 11V Chloroform | | ND | 1.6 | ND | ND | ND | 18.0 | 106 | ND | 18.0 | 86 |
| 12V Dichlorobromomethane | | ND | 2.2 | ND | ND | ND | 18.0 | 100 | ND | 18.0 | 105 |
| 13V Dichlorodifluoromethane | | ND | 10 | ND | ND | ND | 18.0 | 103 | ND | 18.0 | 70 |
| 14V 1,1-Dichloroethane | | ND | 4.7 | ND | ND | ND | 18.0 | 92 | ND | 18.0 | 86 |
| 15V 1,2-Dichloroethane | | ND | 2.8 | ND | ND | ND | 18.0 | 109 | ND | 18.0 | 98 |
| 16V 1,1-Dichloroethylene | | ND | 2.8 | ND | ND | ND | 18.0 | 97 | ND | 18.0 | 107 |
| 17V 1,2-Dichloropropane | | ND | 6.0 | ND | ND | ND | 18.0 | 95 | ND | 18.0 | 103 |
| 18V cis-1,3-Dichloropropylene | | ND | 5.0 | ND | ND | ND | 18.0 | 98 | ND | 18.0 | 106 |
| 19V Ethylbenzene | | ND | 7.2 | ND | ND | ND | 18.0 | 101 | ND | 18.0 | 103 |
| 20V Methyl bromide | | ND | 10 | ND | ND | ND | 18.0 | 111 | ND | 18.0 | 79 |
| 21V Methyl chloride | | ND | 10 | ND | ND | ND | 18.0 | 95 | ND | 18.0 | 78 |
| 22V Methylene chloride | | ND | 2.8 | ND | ND | 7.77 | 18.0 | 70 | ND | 18.0 | 74 |
| 23V 1,1,2,2-Tetrachloroethane | | ND | 6.9 | ND | ND | ND | 18.0 | 97 | ND | 18.0 | 111 |
| 24V Tetrachloroethylene | | ND | 4.1 | ND | ND | ND | 18.0 | 96 | ND | 18.0 | 95 |
| 25V Toluene | | ND | 6.0 | ND | ND | ND | 18.0 | 99 | ND | 18.0 | 99 |
| 26V 1,2-Trans-dichloroethylene | | ND | 1.6 | ND | ND | ND | 18.0 | 103 | ND | 18.0 | 81 |
| 27V 1,1,1-Trichloroethane | | ND | 3.8 | ND | ND | ND | 18.0 | 103 | ND | 18.0 | 107 |
| 28V 1,1,2-Trichloroethane | | ND | 5.0 | ND | ND | ND | 18.0 | 99 | ND | 18.0 | 106 |
| 29V Trichloroethylene | | ND | 1.9 | ND | ND | ND | 18.0 | 100 | ND | 18.0 | 96 |
| 30V Trichlorofluoromethane | | ND | 10 | ND | ND | ND | 18.0 | 112 | ND | 18.0 | 101 |
| 31V Vinyl chloride | | ND | 10 | ND | ND | ND | 18.0 | 102 | ND | 18.0 | 74 |
| 18V trans-1,3-Dichloropropylene | | ND | 10 | ND | ND | ND | 18.0 | 97 | ND | 18.0 | 103 |

B Recovery normally variable using established methodology.



OCT 1, 1986

TABLE 1: QUANTITATIVE RESULTS and QUALITY ASSURANCE DATA

Conventional Analysis Data (QR10)

Chain of Custody Data Required for ETC Data Management Summary Reports

N4357 WASTE MANAGEMENT, INC.

730

WGS103

860903 1730

ETC Sample No.

Company

Facility

Sample Point

Date

Time

Elapsed
Hours

| NPDES Number | Results | | | | | | | |
|------------------------------|-------------------|--------|------|--|--|--|--|--|
| | Sample Concen. | MDL | | | | | | |
| Chloride | mg/l | 54 | 1 | | | | | |
| Fluoride | mg/l | .33 | .1 | | | | | |
| Nitrate as N | mg/l | < .1 | .1 | | | | | |
| Sulfate as SO ₄ | mg/l | 110 | 10 | | | | | |
| Phenolics, Total | mg/l | < .005 | .005 | | | | | |
| Cyanide, Total | mg/l | < .020 | .020 | | | | | |
| Total Organic Halides (TOX) | ug/l | 17 | 5 | | | | | |
| Total Organic Halides (TOX) | ug/l | 23 | 5 | | | | | |
| Total Organic Carbon | mg/l | 12.6 | 1.0 | | | | | |
| Total Organic Carbon | mg/l | 13.8 | 1.0 | | | | | |
| Gross Alpha | pCi/l | 4.1 | | | | | | |
| Gross Alpha | pCi/l | +/-5.5 | | | | | | |
| Gross Beta | pCi/l | 5.7 | | | | | | |
| Gross Beta | pCi/l | +/-5.6 | | | | | | |
| Fecal Coliform | C/100 | >2400 | 2 | | | | | |
| Ammonia as N | mg/l | .6 | .1 | | | | | |
| Chemical Oxygen Demand (COD) | mg/l | 14 | 5 | | | | | |
| Color, Apparent | Co/Pt | 5 | 5 | | | | | |
| Odor | TON | 128 | | | | | | |
| Total Dissolved Solids (TDS) | mg/l | 1010 | 10 | | | | | |

SEP 22, 1986

TABLE 1: QUANTITATIVE RESULTS and QUALITY ASSURANCE DATA

Conventional Analysis Data (QR10)

Chain of Custody Data Required for ETC Data Management Summary Reports

N4371 WASTE MANAGEMENT, INC.

730

WGS104

860904 1535

ETC Sample No.

Company

Facility

Sample Point

Date

Time

Elapsed
Hours

| NPDES Number | Results | | | | | | | |
|------------------------------|------------------|--------|------|--|--|--|--|--|
| | Sample Concn. | MDL | | | | | | |
| Chloride | mg/l | 21 | 1 | | | | | |
| Fluoride | mg/l | .35 | .1 | | | | | |
| Nitrate as N | mg/l | <.1 | .1 | | | | | |
| Sulfate as SO ₄ | mg/l | 120 | 10 | | | | | |
| Phenolics, Total | mg/l | <.005 | .005 | | | | | |
| Cyanide, Total | mg/l | <.020 | .020 | | | | | |
| Total Organic Halides (TOX) | ug/l | 10 | 5 | | | | | |
| Total Organic Halides (TOX) | ug/l | 10 | 5 | | | | | |
| Total Organic Carbon | mg/l | 7.9 | 1.0 | | | | | |
| Total Organic Carbon | mg/l | 8.1 | 1.0 | | | | | |
| Gross Alpha | pCi/l | 17 | | | | | | |
| Gross Alpha | pCi/l | +/-5.6 | | | | | | |
| Gross Beta | pCi/l | 1.8 | | | | | | |
| Gross Beta | pCi/l | +/-3.4 | | | | | | |
| Fecal Coliform | C/100 | 920 | 2 | | | | | |
| Ammonia as N | mg/l | .2 | .1 | | | | | |
| Chemical Oxygen Demand (COD) | mg/l | 17 | 5 | | | | | |
| Color, Apparent | Co/Pt | 7 | 5 | | | | | |
| Odor | TON | 16 | | | | | | |
| Total Dissolved Solids (TDS) | mg/l | 658 | 10 | | | | | |

TABLE 1: QUANTITATIVE RESULTS and QUALITY ASSURANCE DATA

SEP 15, 1986

SEP 22, 1986

TABLE 1: QUANTITATIVE RESULTS and QUALITY ASSURANCE DATA

Ground Water Monitoring Metals (QR41)

Chain of Custody Data Required for ETC Data Management Summary Reports

| | | | | | |
|----------------|------------------------|----------|--------------|--------|-----------------------|
| N4371 | WASTE MANAGEMENT, INC. | 730 | WGS104 | 860904 | 1535 |
| ETC Sample No. | Company | Facility | Sample Point | Date | Time Elapsed Hours |

| Compound | Results | | | | | | | |
|-----------|---------------------------|-------------|--|--|--|--|--|--|
| | Sample Concen. ug/l | MDL ug/l | | | | | | |
| Arsenic | <4 | 4 | | | | | | |
| Barium | 137 | 50 | | | | | | |
| Cadmium | <3 | 3 | | | | | | |
| Chromium | <20 | 20 | | | | | | |
| Lead | 92 | 4 | | | | | | |
| Mercury | <.5 | .5 | | | | | | |
| Selenium | <2 | 2 | | | | | | |
| Silver | <30 | 30 | | | | | | |
| Iron | 55 | 30 | | | | | | |
| Manganese | 511 | 10 | | | | | | |
| Sodium | 18500 | 50 | | | | | | |

OCT 2, 1986

TABLE 1: QUANTITATIVE RESULTS and QUALITY ASSURANCE DATA
RCRA/Ground Water Pesticides (QR09)

| Chain of Custody Data Required for ETC Data Management Summary Reports | | | | | | |
|--|------------------------|----------|--------------|--------|------|---------------|
| ETC Sample No. | Company | Facility | Sample Point | Date | Time | Elapsed Hours |
| N4371 | WASTE MANAGEMENT, INC. | 730 | WGS104 | 860904 | 1535 | |

| Parameter | Results | | QC Replicate | | QC Blank and Spiked Blank | | | QC Matrix Spike | | |
|---|---------------------------|-------------|---------------|----------------|---------------------------|--------------------------|------------|----------------------------|--------------------------|------------|
| | Sample Concen. ug/l | MDL ug/l | First ug/l | Second ug/l | Blank Data ug/l | Concen. Added ug/l | % Recov | Unspiked Sample ug/l | Concen. Added ug/l | % Recov |
| Endrin (GC) | ND | .1 | ND | ND | ND | 0.2 | 98 | ND | 0.2 | 118 |
| Lindane (GC) | ND | .2 | ND | ND | ND | 4.0 | 124 | ND | 4.4 | 107 |
| Methoxychlor (GC) | ND | 5.0 | ND | ND | ND | 100 | 174. | ND | 111 | 139 |
| Toxaphene (GC) | ND | 2.5 | ND | ND | ND | 6.7 | 134 | ND | 5.6 | 92 |
| A Recovery normally variable using established methodology. | | | | | | | | | | |
| GC/ECO MDL calculated for each sample matrix. Indicates compound was less than the sample MDL. | | | | | | | | | | |

OCT 1, 1986

TABLE 1: QUANTITATIVE RESULTS and QUALITY ASSURANCE DATA

Conventional Analysis Data (QR10)

Chain of Custody Data Required for ETC Data Management Summary Reports

| | | | | | |
|----------------|------------------------|----------|--------------|--------|-----------------------|
| N4358 | WASTE MANAGEMENT, INC. | 730 | WGD203 | 860903 | 1700 |
| ETC Sample No. | Company | Facility | Sample Point | Date | Time Elapsed Hours |

| NPDES Number | Results | | | | | | | |
|------------------------------|-------------------|--------|------|--|--|--|--|--|
| | Sample Concen. | MDL | | | | | | |
| Chloride | mg/l | 250 | 1 | | | | | |
| Fluoride | mg/l | 1.3 | .1 | | | | | |
| Nitrate as N | mg/l | <.1 | .1 | | | | | |
| Sulfate as SO ₄ | mg/l | 19 | 10 | | | | | |
| Phenolics, Total | mg/l | <.005 | .005 | | | | | |
| Cyanide, Total | mg/l | <.020 | .020 | | | | | |
| Total Organic Halides (TOX) | ug/l | 5 | 5 | | | | | |
| Total Organic Halides (TOX) | ug/l | 8 | 5 | | | | | |
| Total Organic Carbon | mg/l | 1.3 | 1.0 | | | | | |
| Total Organic Carbon | mg/l | 1.1 | 1.0 | | | | | |
| Gross Alpha | pCi/l | <3.1 | | | | | | |
| Gross Beta | pCi/l | 11 | | | | | | |
| Gross Beta | pCi/l | +/-5.2 | | | | | | |
| Ammonia as N | mg/l | 2.0 | .1 | | | | | |
| Chemical Oxygen Demand (COD) | mg/l | 14 | 5 | | | | | |
| Color, Apparent | Co/Pt | <5 | 5 | | | | | |
| Odor | TON | >1024 | | | | | | |
| Total Dissolved Solids (TDS) | mg/l | 692 | 10 | | | | | |
| Fecal Coliform | C/100 | <2 | 2 | | | | | |

TABLE 1: QUANTITATIVE RESULTS and QUALITY ASSURANCE DATA
RCRA/Ground Water Pesticides (QR09)

Chain of Custody Data Required for ETC Data Management Summary Reports

| | | | | |
|-------|------------------------|-----|--------|-------------|
| N4358 | WASTE MANAGEMENT, INC. | 730 | WGD203 | 860903 1700 |
|-------|------------------------|-----|--------|-------------|

| ETC Sample No. | Company | Facility | Sample Point | Date | Time | Elapsed Hours |
|----------------|---------|----------|--------------|------|------|---------------|
|----------------|---------|----------|--------------|------|------|---------------|

GC/ECD MDL calculated for each sample matrix.
Indicates compound was less than the sample MDL.



SEP 22, 1986

TABLE 1: QUANTITATIVE RESULTS and QUALITY ASSURANCE DATA

Ground Water Monitoring Metals (QR41)

| Chain of Custody Data Required for ETC Data Management Summary Reports | | | | | | |
|--|------------------------|----------|--------------|--------|------|---------------|
| N4358 | WASTE MANAGEMENT, INC. | 730 | WGD203 | 860903 | 1700 | |
| ETC Sample No. | Company | Facility | Sample Point | Date | Time | Elapsed Hours |

| Compound | Results | | | | | | | |
|-----------|--------------------|----------|--|--|--|--|--|--|
| | Sample Concn. ug/l | MDL ug/l | | | | | | |
| Arsenic | <4 | 4 | | | | | | |
| Barium | 585 | 50 | | | | | | |
| Cadmium | <3 | 3 | | | | | | |
| Chromium | <20 | 20 | | | | | | |
| Lead | 177 | 4 | | | | | | |
| Mercury | <.5 | .5 | | | | | | |
| Selenium | 3 | 2 | | | | | | |
| Silver | <30 | 30 | | | | | | |
| Iron | <30 | 30 | | | | | | |
| Manganese | 12 | 10 | | | | | | |
| Sodium | 219000 | 50 | | | | | | |



SEP 22, 1986

TABLE 1: QUANTITATIVE RESULTS and QUALITY ASSURANCE DATA

Conventional Analysis Data (QR10)

Chain of Custody Data Required for ETC Data Management Summary Reports

N4370 WASTE MANAGEMENT, INC.

730

WGD204

860904 1510

ETC Sample No.

Company

Facility

Sample Point

Date

Time

Elapsed
Hours

| NPDES Number | Results | | | | | | | | | |
|------------------------------|------------------|--------|------|--|--|--|--|--|--|--|
| | Sample Concn. | MDL | | | | | | | | |
| Chloride | mg/l | 620 | 1 | | | | | | | |
| Fluoride | mg/l | 1.7 | .1 | | | | | | | |
| Nitrate as N | mg/l | <.1 | .1 | | | | | | | |
| Sulfate as SO4 | mg/l | <10 | 10 | | | | | | | |
| Phenolics, Total | mg/l | <.005 | .005 | | | | | | | |
| Cyanide, Total | mg/l | <.020 | .020 | | | | | | | |
| Total Organic Halides (TOX) | ug/l | 6 | 5 | | | | | | | |
| Total Organic Halides (TOX) | ug/l | 7 | 5 | | | | | | | |
| Total Organic Carbon | mg/l | 2.2 | 1.0 | | | | | | | |
| Total Organic Carbon | mg/l | 2.4 | 1.0 | | | | | | | |
| Gross Alpha | pCi/l | 4.6 | | | | | | | | |
| Gross Alpha | pCi/l | +/-5.4 | | | | | | | | |
| Gross Beta | pCi/l | 13 | | | | | | | | |
| Gross Beta | pCi/l | +/-9.0 | | | | | | | | |
| Fecal Coliform | C/100 | 2 | 2 | | | | | | | |
| Ammonia as N | mg/l | 2.7 | .1 | | | | | | | |
| Chemical Oxygen Demand (COD) | mg/l | 64 | 5 | | | | | | | |
| Color, Apparent | Co/Pt | <5 | 5 | | | | | | | |
| Odor | TON | >1024 | | | | | | | | |
| Total Dissolved Solids (TDS) | mg/l | 1380 | 10 | | | | | | | |

SEP 15, 1986

ETC

ENVIRONMENTAL
TESTING and CERTIFICATION

SEP 22, 1986

TABLE 1: QUANTITATIVE RESULTS and QUALITY ASSURANCE DATA

Ground Water Monitoring Metals (QR41)

Chain of Custody Data Required for ETC Data Management Summary Reports

N4370 WASTE MANAGEMENT, INC.

730

WGD204

860904 1510

ETC Sample No.

Company

Facility

Sample Point

Date

Time

Elapsed
Hours

| Compound | Results | | | | | | | | | |
|-----------|---------------------------|-------------|--|--|--|--|--|--|--|--|
| | Sample Concen. ug/l | MDL ug/l | | | | | | | | |
| Arsenic | <4 | 4 | | | | | | | | |
| Barium | 3310 | 50 | | | | | | | | |
| Cadmium | <3 | 3 | | | | | | | | |
| Chromium | <20 | 20 | | | | | | | | |
| Lead | 63 | 4 | | | | | | | | |
| Mercury | <.5 | .5 | | | | | | | | |
| Selenium | <2 | 2 | | | | | | | | |
| Silver | <30 | 30 | | | | | | | | |
| Iron | 62 | 30 | | | | | | | | |
| Manganese | 16 | 10 | | | | | | | | |
| Sodium | 368000 | 50 | | | | | | | | |

OCT 2 1986

TABLE 1: QUANTITATIVE RESULTS and QUALITY ASSURANCE DATA
RCRA/Ground Water Pesticides (QR09)

Chain of Custody Data Required for ETC Data Management Summary Reports

N4370

WASTE MANAGEMENT, INC.

730

WGD204

860904 1510

ETC Sample No.

Company

Facility

Sample Point

Date _____

Time

Elapsed
Hours

[illegible]

JUN 19, 1986

TABLE 1: QUANTITATIVE RESULTS and QUALITY ASSURANCE DATA

Conventional Analysis Data (QR10)

Chain of Custody Data Required for ETC Data Management Summary Reports

M3788

WASTE MANAGEMENT, INC.

730

WGS103

860604 1125

ETC Sample No.

Company

Facility

Sample Point

Date

Time

Elapsed
Hours

| NPDES Number | Results | | | | | | | | | |
|-----------------------------------|-------------------|-----|--|--|--|--|--|--|--|--|
| | Sample Concen. | MDL | | | | | | | | |
| Chloride mg/l | 50 | 1 | | | | | | | | |
| Total Organic Carbon mg/l | 10.0 | 1.0 | | | | | | | | |
| Total Organic Carbon mg/l | 10.4 | 1.0 | | | | | | | | |
| Chemical Oxygen Demand (COD) mg/l | 15 | 5 | | | | | | | | |
| Color, Apparent Co/Pt | 7 | 5 | | | | | | | | |
| Odor TON | 1 | | | | | | | | | |
| Total Dissolved Solids (TDS) mg/l | 1000 | 10 | | | | | | | | |

JUN 22, 1986

TABLE 1: QUANTITATIVE RESULTS and QUALITY ASSURANCE DATA

Conventional Analysis Data (QR10)

Chain of Custody Data Required for ETC Data Management Summary Reports

| | | | | | |
|----------------|------------------------|----------|--------------|--------|-----------------------|
| M3789 | WASTE MANAGEMENT, INC. | 730 | WGS104 | 860604 | 0950 |
| ETC Sample No. | Company | Facility | Sample Point | Date | Time Elapsed Hours |

| NPDES Number | Results | | | | | | | | | |
|-----------------------------------|-------------------|-----|--|--|--|--|--|--|--|--|
| | Sample Concen. | MDL | | | | | | | | |
| Chloride mg/l | 56 | 1 | | | | | | | | |
| Total Organic Carbon mg/l | 7.4 | 1.0 | | | | | | | | |
| Total Organic Carbon mg/l | 7.1 | 1.0 | | | | | | | | |
| Chemical Oxygen Demand (COD) mg/l | 12 | 5 | | | | | | | | |
| Color, Apparent Co/Pt | 7 | 5 | | | | | | | | |
| Odor TON | 1 | | | | | | | | | |
| Total Dissolved Solids (TDS) mg/l | 670 | 10 | | | | | | | | |

ETCENVIRONMENTAL
TESTING and CERTIFICATION

JUN 20, 1986

TABLE 1: QUANTITATIVE RESULTS and QUALITY ASSURANCE DATA**Conventional Analysis Data (QR10)**

Chain of Custody Data Required for ETC Data Management Summary Reports

M3798 WASTE MANAGEMENT, INC.

730

WGD203

860604 0855

ETC Sample No.

Company

Facility

Sample Point

Date

Time

Elapsed
Hours

| NPDES Number | Results | | | | | | | | | |
|----------------------------------|-------------------|-----|--|--|--|--|--|--|--|--|
| | Sample Concen. | MDL | | | | | | | | |
| Chloride mg/l | 220 | 1 | | | | | | | | |
| Total Organic Carbon mg/l | 2.6 | 1.0 | | | | | | | | |
| Total Organic Carbon mg/l | 2.6 | 1.0 | | | | | | | | |
| Chemical Oxygen Demand (COD)mg/l | 16 | 5 | | | | | | | | |
| Color, Apparent Co/Pt | <5 | 5 | | | | | | | | |
| Odor TON | >1020 | | | | | | | | | |
| Total Dissolved Solids (TDS)mg/l | 720 | 10 | | | | | | | | |



JUN 20, 1986

TABLE 1: QUANTITATIVE RESULTS and QUALITY ASSURANCE DATA

Conventional Analysis Data (QR10)

Chain of Custody Data Required for ETC Data Management Summary Reports

M3799 WASTE MANAGEMENT, INC.

730

WGD204

860603 1405

ETC Sample No.

Company

Facility

Sample Point

Date

Time

Elapsed
Hours

| NPDES Number | Results | | | | | | | | | |
|-----------------------------------|-------------------|-----|--|--|--|--|--|--|--|--|
| | Sample Concen. | MDL | | | | | | | | |
| Chloride mg/l | 600 | 1 | | | | | | | | |
| Total Organic Carbon mg/l | 6.2 | 1.0 | | | | | | | | |
| Total Organic Carbon mg/l | 6.0 | 1.0 | | | | | | | | |
| Chemical Oxygen Demand (COD) mg/l | 23 | 5 | | | | | | | | |
| Color, Apparent Co/Pt | <5 | 5 | | | | | | | | |
| Odor TON | >1020 | | | | | | | | | |
| Total Dissolved Solids (TDS) mg/l | 1370 | 10 | | | | | | | | |

CHARLOTTE E. BALDWIN
SECRETARY



MARTHA LAYNE COLLINS
GOVERNOR

COMMONWEALTH OF KENTUCKY
NATURAL RESOURCES AND ENVIRONMENTAL PROTECTION CABINET
DEPARTMENT FOR ENVIRONMENTAL PROTECTION
FORT BOONE PLAZA
18 REILLY ROAD
FRANKFORT, KENTUCKY 40601

MEMORANDUM

TO: Barry Burrus, Chief *BB*
Uncontrolled Site Section

THRU: Robert Prewitt, Environmental Program Coordinator *RP*
Uncontrolled Site Section

FROM: Robert Burns, Environmentalist Senior *RB*
Uncontrolled Site Section

DATE: May 29, 1985

SUBJECT: Preliminary Assessment for the Mobile Waste Control of Kentucky
Landfill, Jefferson County
EPA I.D.# KYD980557078

The Mobile Waste Control of Kentucky Landfill, Mobil Waste Control, and SCA of Kentucky Fill are located on the same site area and are operated by the Waste Management Company. These sites should be considered aliases. This landfill is known to have accepted hazardous wastes, including hazardous liquids. Some of the wastes disposed at this landfill include waste oils, paint sludge, triphenyl phosphine, and hexachlorocyclopentadine.

The disposal area, as a whole, can be divided into an old area; located north of the Slop Ditch, and a new area, south of the Slop Ditch. The new area has a leachate collection system and groundwater monitoring wells; the old area has neither. The geology of the landfill is good for the containment of wastes and prevention of migration. The geology consists of 20 feet of clay over 30 feet of New Albany Shale.

Monitoring of the groundwater wells should indicate whether contamination is a problem with the new fill area, but as mentioned above, the old fill area has no groundwater monitoring wells.

After review of the KYNREPC files, conversations with field personnel and the completion of a preliminary assessment, it is recommended that this site be inspected on a medium priority. Responsible parties should be requested to install groundwater monitoring wells in the old fill area and conduct environmental samples to determine if this site does pose problems.

RB/tlj



POTENTIAL HAZARDOUS WASTE SITE
PRELIMINARY ASSESSMENT
PART 1 - SITE INFORMATION AND ASSESSMENT

I. IDENTIFICATION

01 STATE 02 SITE NUMBER
KY 10430557028

II. SITE NAME AND LOCATION

| | | | | | |
|---|-----------------------|--|-------------------------------|------------------------------|------------------------------|
| 01 SITE NAME (Legal, common, or descriptive name of site) <i>West of Highway 200 of Kentucky</i> | | 02 STREET, ROUTE NO., OR SPECIFIC LOCATION IDENTIFIER <i>2373 Outer Loop Road</i> | | | |
| 03 CITY <i>Jefferson</i> | 04 STATE <i>Ky</i> | 05 ZIP CODE <i>40219</i> | 06 COUNTY <i>Jefferson</i> | 07 COUNTY CODE <i>111</i> | 08 CONG DIST <i>03.04</i> |
| 09 COORDINATES LATITUDE <i>36° 15' 00"</i> | | LONGITUDE <i>85° 43' 00"</i> | | | |

10 DIRECTIONS TO SITE (Starting from nearest public road)

West on Expressway West to Preston Street South. Turn left onto Grade Lane, go approx. 1/4 mile, site is on the left.

III. RESPONSIBLE PARTIES

| | | | | | |
|---|-----------------------|---|--|--|--|
| 01 OWNER (if known) <i>West of Highway 200 Company</i> | | 02 STREET (Business, mailing, residential) <i>2373 Outer Loop Road</i> | | | |
| 03 CITY <i>Jefferson</i> | 04 STATE <i>Ky</i> | 05 ZIP CODE <i>40219</i> | 06 TELEPHONE NUMBER <i>502-966-0272</i> | | |
| 07 OPERATOR (if known and different from owner) <i>West of Highway 200</i> | | 08 STREET (Business, mailing, residential) <i>2373 Outer Loop Road</i> | | | |
| 09 CITY <i>Jefferson</i> | 10 STATE <i>Ky</i> | 11 ZIP CODE <i>40219</i> | 12 TELEPHONE NUMBER <i>502-966-0272</i> | | |

13 TYPE OF OWNERSHIP (Check one)

☒ A. PRIVATE ☐ B. FEDERAL: _____ (Agency name) ☐ C. STATE ☐ D. COUNTY ☐ E. MUNICIPAL
☐ F. OTHER: _____ (Specify) ☐ G. UNKNOWN

4 OWNER/OPERATOR NOTIFICATION ON FILE (Check all that apply)

☐ A. RCRA 3001 DATE RECEIVED: 1/1 / 1 / 1 MONTH DAY YEAR ☐ B. UNCONTROLLED WASTE SITE (CERCLA 103 c) DATE RECEIVED: 1 / 1 / 1 MONTH DAY YEAR ☐ C. NONE

IV. CHARACTERIZATION OF POTENTIAL HAZARD

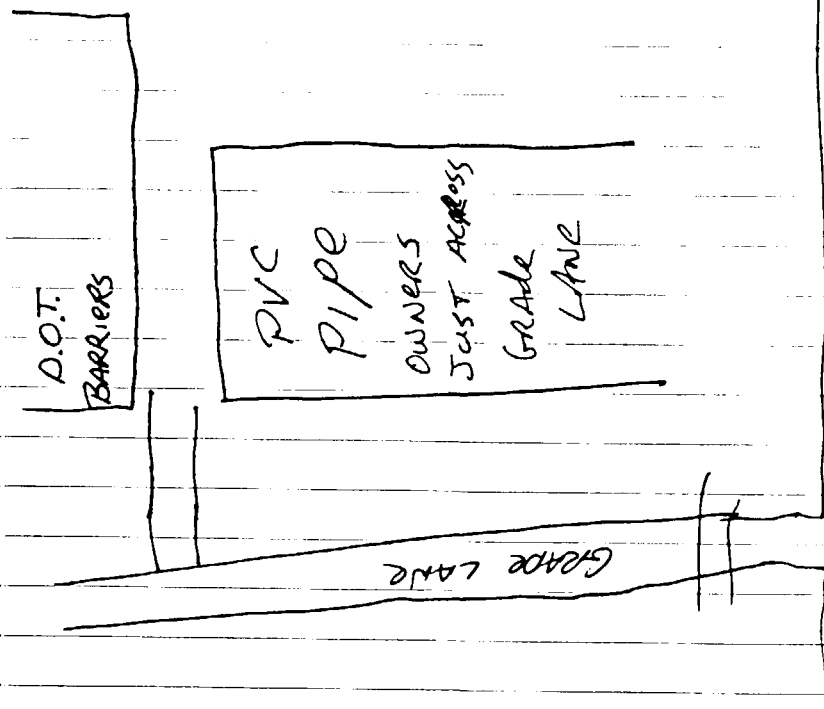
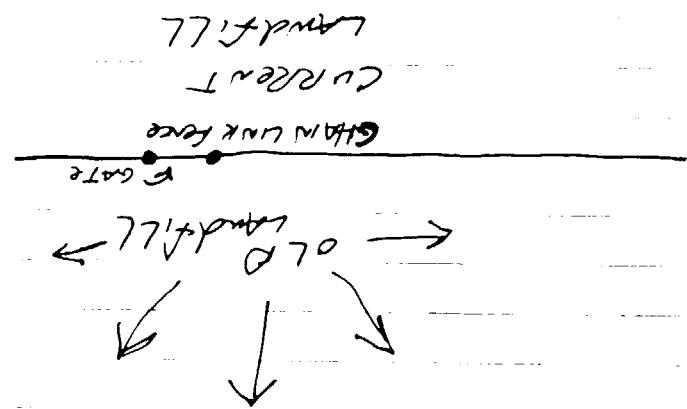
| | | | | | |
|--|--|--|--|--|--|
| 01 ON SITE INSPECTION <input type="checkbox"/> YES DATE <u>3/17/85</u> MONTH DAY YEAR <input type="checkbox"/> NO | | BY (Check all that apply) <input type="checkbox"/> A. EPA <input type="checkbox"/> B. EPA CONTRACTOR <input checked="" type="checkbox"/> C. STATE <input type="checkbox"/> D. OTHER CONTRACTOR <input type="checkbox"/> E. LOCAL HEALTH OFFICIAL <input type="checkbox"/> F. OTHER: _____ (Specify) CONTRACTOR NAME(S): _____ | | | |
| 02 SITE STATUS (Check one) <input type="checkbox"/> A. ACTIVE <input type="checkbox"/> B. INACTIVE <input type="checkbox"/> C. UNKNOWN | | 03 YEARS OF OPERATION <u>1969</u> BEGINNING YEAR <u>1</u> ENDING YEAR <input type="checkbox"/> UNKNOWN | | | |
| 04 DESCRIPTION OF SUBSTANCES POSSIBLY PRESENT, KNOWN, OR ALLEGED <i>This facility has a history of accepting liquid hazardous wastes, waste oils, paint sludge, kerosene, phosphine, and hexachlorocyclopentadiene.</i> | | | | | |
| 05 DESCRIPTION OF POTENTIAL HAZARD TO ENVIRONMENT AND/OR POPULATION <i>Potential for ground & surface water contamination, soil and air contamination.</i> | | | | | |

V. PRIORITY ASSESSMENT

01 PRIORITY FOR INSPECTION (Check one. If high or medium is checked, complete Part 2 - Waste Information and Part 3 - Description of Hazardous Conditions and Incidents)
☐ A. HIGH (Inspection required promptly) ☐ B. MEDIUM (Inspection required) ☐ C. LOW (Inspect on time available basis) ☐ D. NONE (No further action needed, complete current disposition form)

VI. INFORMATION AVAILABLE FROM

| | | | | |
|--|--|---|--|--|
| 01 CONTACT <i>John A. Smith</i> | 02 OF (Agency/Organization) <i>KW32PC</i> | | 03 TELEPHONE NUMBER <i>502-588-4254</i> | |
| 04 PERSON RESPONSIBLE FOR ASSESSMENT <i>John A. Smith</i> | 05 AGENCY <i>KW32PC</i> | 06 ORGANIZATION <i>West Management</i> | 07 TELEPHONE NUMBER <i>502-564-6716</i> | 08 DATE <u>4</u> / <u>26</u> / <u>85</u> MONTH DAY YEAR |



OUTER LOOP

11-7-88

MOBILE WASTE CONTROL of Ky.

This Landfill is being combined into The WASTE MGT. Landfill known as The OUTER LOOP Landfill.

Refer to Louisville EAST QUAD - Lower Left corner - AREA Between Melton Ave. to the north, I-65 to the east, Hwy 1065 or the OUTER LOOP to the south, and Grade Lane to the west ≈ 480 ACRES

ENTIRE AREA PERMITTED should be under STATE Regulations and monitored By STATE inspectors
Geology in AREA - COVER SOIL MATERIAL - CLAY - Running approximately 20 feet deep - next LAYER New Albany shale ≈ 30 feet thick

DRAINAGE DITCH on Road and through site DRAIN into the Southern Ditch

NOTE: I used to WORK AT the end of Melton Ave. The buildings on MELTON + Knopp are MAINLY small businesses there are NO permanent Residents to my knowledge, However there maybe 1 or 2

Record of Communication

☐ PHONE CALL☐ DISCUSSION☒ ON-SITE☐ CONFERENCE☐ OTHER☐ ON-CALLTO: *Mobile Waste Control File*FROM: *Cecil IHGLEHART*DATE: *11-7-88*TIME: *10:30 Am*

SUBJECT:

SUMMARY OF COMMUNICATION:

Cecil IHGLEHART is a Chief Engineer with WASTE management, who now own/operate the LANDFILL known as the Outer Loop Landfill formerly owned by Mobile Waste Control.

Mr Ihglehart was able to distinguish the old boundary and the current Boundary which I marked on my map. He also pointed out the location of groundwater monitoring wells.

He gave me a Brief history of the site and previous owners, as well as their future plans for the site.

In pointing out groundwater wells he also showed the direction of groundwater flow.

Robert W. Kain
11-7-88

CONCLUSIONS, ACTION TAKEN OR REQUIRED:

INFORMATION COPIES
TO

Record of Communication

☐ PHONE CALL☐ DISCUSSION☐ ON-SITE☐ CONFERENCE☒ OTHER☐ ON-CALLTO: *File*FROM: *Robert Keiser*DATE: *11-9-88*

TIME:

SUBJECT: *SURFACE + Groundwater Users*

SUMMARY OF COMMUNICATION:

ON FILE IN OUR OFFICE WE HAVE A COPY OF THE LOUISVILLE WATER CO. WATER DISTRIBUTION LINE MAP. BY COMPARING TOPOGRAPHIC MAPS OUTLINING A 4 mile RADIUS OF THE SITE WITH THE WATER DISTRIBUTION MAP I WAS ABLE TO DETERMINE THERE ARE NO AREAS UNSERVICED BY MUNICIPAL WATER.

THE LOUISVILLE WATER CO. HAS ^{AN} EXTENSIVE SERVICE AREA WELL BEYOND THE 4 mile RADIUS OF THE SITE.

Robert W Keiser

CONCLUSIONS, ACTION TAKEN OR REQUIRED:

11-9-88

INFORMATION COPIES

TO:

SAS

13:49 FRIDAY, JULY 15, 1988 11

| NO | PUBLIC WATER SYSTEM NAME | STREET ADDRESS | CITY | ZIP | COUNTY | PHONE NO. | SOURCE | DIST | POPULATION | SEASON BEGIN END | SEMI PUBLIC | REG BY | PLANT TYPE | |
|---------|---------------------------------|------------------------|----------------|-----------|-----------|--------------|--------------|------|------------|---------------------|----------------|-----------|---------------|---|
| 40470 | SUBURBAN MOBILE HOME PARK | 239 JUDY LANE | ROBYNWOOD HTS | CYNTHIANA | 41031 | HARRISON | 606/234-6679 | G | 06 | 19 | 01/01 12/31 | Y | N | N |
| 40532 | BONNIEVILLE WATER DISTRICT | PO BOX 85 | BONNIEVILLE | 42713 | HART | 502/531-1633 | P | 04 | 600 | 00/00 00/00 | | B | C | |
| 40566 | GREEN RIVER VALLEY WATER DIST | ROUTE 1 | CAVE CITY | 42127 | HART | 502/528-2081 | S | 04 | 14,500 | 00/00 00/00 | | B | C | |
| 40505 | MUNFORDVILLE WATER WORKS | P O BOX 85 | MUNFORDVILLE | 42765 | HART | 502/524-5701 | P | 04 | 2,060 | 00/00 00/00 | | B | C | |
| 40586 | HENDERSON MUN WATER/SWP DEPT | P O BOX 341 | HENDERSON | 42420 | HENDERSON | 502/826-2421 | S | 02 | 26,364 | 00/00 00/00 | | B | C | |
| 40539 | HENDERSON COUNTY WATER DIST | P O BOX 655 | HENDERSON | 42420 | HENDERSON | 502/826-9802 | P | 02 | 11,557 | 00/00 00/00 | | B | C | |
| 40506 | ALCAN INGOT & RECYCLING | PO BOX 44 | HENDERSON | 42420 | HENDERSON | 502/521-7811 | S | 02 | 750 | 07/01 06/30 | | B | N | |
| 40579 | CORPS OF ENGRS GR LOCK/DAM #1 | | SPOTTSVILLE | 42458 | HENDERSON | 502/826-7360 | G | 02 | 20 | 01/01 12/31 | Y | N | N | |
| 405013 | ELLIS PARK WATER WORKS | RT 2 1525 CAMELOT DR | HENDERSON | 42420 | HENDERSON | 502/826-0508 | G | 02 | 4,600 | 05/01 10/31 | | B | N | |
| 405122 | EMINENCE WATER WORKS | P O BOX 21 | EMINENCE | 40019 | HENRY | 502/645-4159 | P | 06 | 2,840 | 00/00 00/00 | | B | C | |
| 405192 | HENRY COUNTY WATER DISTRICT #2 | P O BOX 219 | CAMPBELLSBURG | 40011 | HENRY | 502/532-6279 | G | 06 | 9,798 | 00/00 00/00 | | B | C | |
| 405519 | CAMPBELLSBURG WATER WORKS | P O BOX 67 | CAMPBELLSBURG | 40011 | HENRY | 502/532-6019 | W | 06 | 1,000 | 00/00 00/00 | | B | C | |
| 405520 | NEW CASTLE WATER WORKS | P O BOX 171 | NEW CASTLE | 40050 | HENRY | 502/645-2900 | P | 06 | 1,379 | 00/00 00/00 | | B | C | |
| 405600 | CORPS OF ENGRS KP LOCK/DAM #3 | PT 1 | PLEASUREVILLE | 40057 | HENRY | 502/678-4500 | G | 06 | 20 | 01/01 12/31 | Y | N | N | |
| 405053 | ALBERT F TURNER TR CT | 309 E CLAY | CLINTON | 42031 | HICKMAN | 502/653-4404 | G | 01 | 10 | 01/01 12/31 | Y | N | N | |
| 405077 | KY WATER SERVICE CO INC | P O BOX 178 | CLINTON | 42031 | HICKMAN | 502/653-3621 | G | 01 | 2,430 | 00/00 00/00 | | B | C | |
| 405063 | COLUMBUS WATER WORKS | GENERAL DELIVERY | COLUMBUS | 42032 | HICKMAN | 502/677-4311 | G | 01 | 396 | 00/00 00/00 | | B | C | |
| 405546 | K AND N WATER SYSTEM | BOX 65 | CLINTON | 42031 | HICKMAN | 000/653-6708 | G | 01 | 90 | 00/00 00/00 | | B | C | |
| 405255 | HAPPER'S COUNTRY HAMS | BOX 122 | CLINTON | 42031 | HICKMAN | 502/653-2081 | G | 01 | 85 | 01/01 12/31 | | B | N | |
| 404028 | EARLINGTON WATER/SEWER SYSTEM | WEST MAIN ST | EARLINGTON | 42410 | HOPKINS | 502/383-5121 | S | 02 | 2,475 | 00/00 00/00 | | B | C | |
| 404028 | NORTH HOPKINS WATER DISTRICT | PT 3 BOX 227 | MADISONVILLE | 42431 | HOPKINS | 502/821-4695 | P | 02 | 574 | 00/00 00/00 | | B | C | |
| 404269 | MORTONS GAP WATER DEPT | GENERAL DELIVERY | MORTONS GAP | 42440 | HOPKINS | 502/258-5362 | P | 02 | 1,715 | 00/00 00/00 | | B | C | |
| 404328 | NORTONVILLE WATER WORKS | BOX 770 | NORTONVILLE | 42442 | HOPKINS | 502/676-3384 | G | 02 | 2,699 | 00/00 00/00 | | B | C | |
| 404426 | SOUTH HOPKINS WATER DISTRICT | P O BOX 308 | DAWSON SPRINGS | 42408 | HOPKINS | 502/797-5760 | P | 02 | 6,630 | 00/00 00/00 | | B | C | |
| 404465 | WHITE PLAINS WATER DIST | P O BOX 102 | WHITE PLAINS | 42464 | HOPKINS | 502/676-6639 | G | 02 | 1,320 | 00/00 00/00 | | B | C | |
| 404491 | DAWSON SPRINGS MINERAL TR INC. | P O BOX 504 | DAWSON SPRINGS | 42408 | HOPKINS | 502/797-8750 | G | 02 | 50 | | | B | C | |
| 404656 | HANSON WATER SYSTEM | P O BOX 63 | HANSON | 42413 | HOPKINS | 502/322-8521 | P | 02 | 1,211 | 00/00 00/00 | | B | C | |
| 404926 | MADISONVILLE LIGHT WATER | P O BOX 704 | MADISONVILLE | 42431 | HOPKINS | 502/821-6901 | S | 02 | 27,822 | 00/00 00/00 | | B | C | |
| 404958 | DAWSON SPRINGS WTR/SWP SYSTEM | P O BOX 216 | DAWSON SPRINGS | 42408 | HOPKINS | 502/797-2844 | S | 02 | 3,696 | 00/00 00/00 | | B | C | |
| 404977 | NEBO WATER DISTRICT | PO BOX 147 | NEBO | 42441 | HOPKINS | 502/249-3709 | P | 02 | 2,930 | 00/00 00/00 | | B | C | |
| 404573 | PITTSBURG MIDWAY COAL MINE CO | P O BOX 1056 | MADISONVILLE | 42431 | HOPKINS | 502/821-4547 | S | 02 | 168 | 07/01 06/00 | | B | N | |
| 404870 | P & M COAL CO PLEASANT HILL MI | P O BOX 191 | WHITE PLAINS | 42464 | HOPKINS | 502/676-3372 | G | 02 | 34 | 01/01 12/31 | | B | N | |
| 405209 | JACKSON CO WATER DISTRICT AGON | P O BOX 232 | TYNER | 40446 | JACKSON | 606/287-7000 | G | 09 | 5,339 | 00/00 00/00 | | B | C | |
| 405074 | MOKEE WATER WORKS | P O BOX 455 | MOKEE | 40447 | JACKSON | 606/287-6305 | S | 09 | 967 | 00/00 00/00 | | B | C | |
| 4052105 | CAMP ANDREW JACKSON | PT 2 BOX 6 | MOKEE | 40447 | JACKSON | 606/287-7073 | S | 09 | 100 | 06/01 09/00 | | B | N | |
| 4052171 | HODGES GR ELEM JACKSON BOARD | US 421 SOUTH | MOKEE | 40447 | JACKSON | 606/287-7181 | G | 09 | 179 | 09/01 05/01 | | B | N | |
| 4052491 | HIGEL DAY CARE CENTER PRESCHOOL | BOX 252 H-7 | MOKEE | 40447 | JACKSON | 606/945-3167 | P | 09 | 30 | 01/01 12/01 | | B | N | |
| 4052543 | HIGEL ELEM JACKSON BOARD EDUC | US 421 SOUTH | MOKEE | 40447 | JACKSON | 606/287-7181 | P | 09 | 39 | 09/01 05/00 | | B | N | |
| 4052112 | JEFFERSONTOWN MUN WATER WORKS | P O BOX 499367 | JEFFERSONTOWN | 40299 | JEFFERSON | 502/267-1256 | P | 06 | 12,620 | 00/00 00/00 | | B | C | |
| 4052286 | LOUISVILLE WATER COMPANY | 435 SOUTH THIRD STREET | LOUISVILLE | 40202 | JEFFERSON | 502/569-3601 | S | 06 | 732,550 | 00/00 00/00 | | B | C | |
| 405146 | KENTUCKY BUBBLING SPRING INC | 7713 OLD WESTPORT RD | LOUISVILLE | 40212 | JEFFERSON | 502/893-3668 | G | 06 | 100 | 00/00 00/00 | | B | C | |
| 4052503 | CRYSTAL CLEAR WATER COMPANY | 1899 PRODUCE ROAD | LOUISVILLE | 40213 | JEFFERSON | 502/949-7000 | P | 06 | 250 | 00/00 00/00 | | B | C | |

OVERSIZED

DOCUMENT

Record of Communication

☐ PHONE CALL☐ DISCUSSION☒ ON-SITE☐ CONFERENCE☐ OTHER☐ ON-CALL

TO: Academy of Science

FROM: Robert Keiser

DATE: 11-9-88

TIME: 10:30

SUBJECT: Endangered Species

SUMMARY OF COMMUNICATION:

By Comparing my topographic maps to current Academy of Science maps I was able to locate + identify the following endangered species as listed per quadrangle.

| <u>BROOKS QUAD</u> | <u>Loc. E.</u> | <u>Loc. W.</u> |
|------------------------|-------------------------|-------------------------|
| #3 SAGITTARIA GRAMINEA | #1 CLONOPHIS KIRTLANDII | #1 CLONOPHIS KIRTLANDII |
| 4 MYOTIS KEENII | 2 ACCIPITER COOPERII | 16 " " |
| 6 RUBUS WHARTONIAE | 4 MALUS IOENSIS | 17 " " |
| 8 CABOMBA CAROLINIANA | 7 CLONOPHIS KIRTLANDII | 18 " " |

VALLEY STATION

#1 STELLARIA LONGIFOLIA

Also, on The Brooks + Valley Station Quadrangles - The Jefferson County Memorial Forest is located just within the 4 mile Radius

Robert Keiser
11-9-88

CONCLUSIONS, ACTION TAKEN OR REQUIRED:

INFORMATION COPIES
TO

and/or preservation efforts. The status designations assigned have no legal or statutory implication but rather were established as a tool by the Endangered Species Committee and KNPC to monitor the survival potential of the species. The three KAS-KNPC status categories utilized are coded in capital letters and defined as follows:

Endangered (E). A species which is in danger of extirpation and/or extinction throughout all or a significant part of its range in Kentucky.

Threatened (T). A species which is likely to become endangered within the foreseeable future throughout all or a significant part of its range in Kentucky.

Special Concern (S). A species that should be monitored because (a) it exists in a limited geographic area, (b) it may become threatened or endangered due to modification or destruction of habitat, (c) certain characteristics or requirements make it especially vulnerable to specific pressures, (d) experienced researchers have identified other factors that may jeopardize it, or (e) it is thought to be rare or declining but insufficient information exists for assignment to the threatened or endangered status categories.

Federal status categories and definitions used include:

Endangered (E). "...any species which is in danger of extinction throughout all or a significant portion of its range..." (1).

Threatened (T). "...any species which is likely to become an endangered species within the foreseeable future throughout all or a significant portion of its range" (1).

Category 1 (C1). Status review taxa for which the United States Fish and Wildlife Service "...has substantial information on hand to support the biological appropriateness of proposing to list as endangered or threatened" (7).

Category 2 (C2). Status review taxa for which information now in possession of the United States Fish and Wildlife Service "...indicates that proposing to list as endangered or threatened is possibly appropriate, but for which conclusive data on biological vulnerability and threat are not currently available to support proposed rules" (7).

INTRODUCTION TO THE PLANT AND ANIMAL LISTS

The nomenclature utilized for plant species follows Kartesz and Kartesz (10). The sources consulted for the common and scientific names of animals are as follows: crustaceans - Hobbs (11), Holsinger (12), United States Fish and Wildlife Service (5,13); gastropods - Thompson and Porter (14); pelecypods - Stansbery and Bogan (15); fishes - Bailey et al. (16), Carney (17), Robins et al. (18), Stauffer et al. (19); amphibians and reptiles - Collins et al. (20); birds - American Ornithologist's Union (21); mammals - Hall (22).

DISCUSSION

This new KAS-KNPC list includes 337 plant and 242 animal taxa. Based on generally accepted estimates of the number of native species occurring in Kentucky, the following approximate per cent of the groups indicated can be considered Endangered, Threatened, or of Special Concern: plants - 11%, pelecypods - 36%, fishes - 31%, amphibians and reptiles - 23%, birds - 15%, and mammals - 33%. Although extensive, the list does not adequately treat or include several groups of organisms found in Kentucky. The thallophytes, bryophytes, insects, amphipods, isopods, terrestrial and freshwater gastropods, and other groups are also important elements of our natural heritage, but are poorly known in Kentucky. Researchers are encouraged to undertake studies that will provide information needed to determine the status of members of these groups in Kentucky.

The bird monitoring strategies presented by Branson et al. (2) are no longer being used. The list and monitoring activities are now limited to species that nest or historically nested in Kentucky, and those listed or under status review by the United States Fish and Wildlife Service.

All of the species listed are being monitored in Kentucky by KNPC. However, information regarding species that have been delisted and many others that were not included in Branson et al. (2) or this list is being maintained in manual files at KNPC. This is being done so that we can respond to unforeseen changes in distribution or status.

We invite input from knowledgeable individuals on native species they believe deserve a status change or should be added to or deleted from the list. Each such petition

should include the scientific name of the organism, its habitat requirements, collection information (i.e., localities, number of specimens, dates, disposition of specimens), historic and present distribution, whether the species has been specifically sought during field work, threats, and recommended KAS-KNPC status. Petitions should be forwarded to the Director, KNPC, who will contact the Endangered Species Committee Chairperson and appropriate committee members for timely petition review and comment. The petitioner will be notified regarding the outcome of the review. In an effort to make the list more responsive to changes in information, all changes resulting from this petition process will be succinctly reported in the Transactions as revisions of the list.

We reiterate the hope expressed by Branson et al. (2) that this updated list of Kentucky's rare plants and animals will assist developers and decisionmakers in reaching informed decisions concerning the most effective use of Kentucky's natural resources. Only by focusing attention on the rarest elements of our natural heritage can we avoid the unnecessary destruction of our diverse flora and fauna.

PLANT LIST

| | KAS-KNPC | STATUS FEDERAL |
|----------------------------------|----------|-------------------|
| <i>Acer spicatum</i> | T | |
| Mountain Maple | | |
| <i>Aconitum uncinatum</i> | T | |
| Monkshood | | |
| <i>Adiantum capillus-veneris</i> | E | |
| Venus Hair Fern | | |
| <i>Adlumia fungosa</i> | E | |
| Allegheny Vine | | |
| <i>Agalinis decemloba</i> | E | |
| Purple False Foxglove | | |
| <i>Agalinis obtusifolia</i> | S | |
| Purple False Foxglove | | |
| <i>Agalinis skinneriana</i> | T | |
| Purple False Foxglove | | |
| <i>Agrimonia gryposepala</i> | S | |
| Agrimony | | |
| <i>Allium burdickii</i> | E | |
| Narrow-leaved Wild Leek | | |
| <i>Amlanthium muscaetoxicum</i> | T | |
| Fly Poison | | |
| <i>Angelica trilobata</i> | E | |
| Filmy Angelica | | |
| <i>Aplos priceana</i> | E | C1 |
| Price's Groundnut | | |
| <i>Arabis glabra</i> | S | |
| Tower Mustard | | |

| | KAS-KNPC | STATUS FEDERAL |
|---|----------|-------------------|
| <i>Arabis missouriensis</i> | E | |
| Missouri Rock Cress | | |
| <i>Arabis perstellata</i> var. <i>perstellata</i> | E | C1 |
| Rock Cress | | |
| <i>Arenaria cumberlandensis</i> | E | C1 |
| Sandwort | | |
| <i>Arenaria fontinalis</i> | T | C1 |
| Water Stitchwort | | |
| <i>Armoracia aquatica</i> | T | |
| Lake Cress | | |
| <i>Aster concolor</i> | E | |
| Aster | | |
| <i>Aster pilosus</i> var. <i>priceae</i> | S | |
| White Heath Aster | | |
| <i>Aster sericeus</i> | T | |
| Silky Aster | | |
| <i>Aster texanus</i> | E | |
| Texas Aster | | |
| <i>Aureolaria patula</i> | E | C1 |
| False Foxglove | | |
| <i>Baptisia leucophaea</i> | S | |
| Crepe Wild Indigo | | |
| <i>Baptisia tinctoria</i> | T | |
| Yellow Wild Indigo | | |
| <i>Bartonia virginica</i> | E | |
| Screwstem | | |
| <i>Berchemia scandens</i> | E | |
| Rattan Vine | | |
| <i>Botrychium matricarifolium</i> | E | |
| Matricary Grape Fern | | |
| <i>Botrychium onoidense</i> | E | |
| Blunt-lobed Grape Fern | | |
| <i>Bouteloua curtipendula</i> | S | |
| Side-oats Grama | | |
| <i>Boykinia aconitifolia</i> | T | |
| Brook Saxifrage | | |
| <i>Cabomba caroliniana</i> | S | |
| Fanwort | | |
| <i>Calamagrostis canadensis</i> | E | |
| Blue Joint Grass | | |
| <i>Calamagrostis cinnoides</i> | S | |
| Cinna-like Reed Grass | | |
| <i>Calamagrostis porterii</i> | E | |
| Porter's Reed Grass | | |
| <i>Calopogon tuberosus</i> | E | |
| Grass Pink | | |
| <i>Caltha palustris</i> | E | |
| Marsh Marigold | | |
| <i>Calycanthus floridus</i> | T | |
| Sweet Shrub | | |
| <i>Calypophus serrulatus</i> | S | |
| Evening Primrose | | |
| <i>Carex australis</i> | E | |
| Sedge | | |
| <i>Carex buxbaumii</i> | E | |
| Sedge | | |

| | KAS- KNPC | STATUS FEDERAL | | KAS- KNPC | STATUS FEDERAL |
|-------------------------------|--------------|-------------------|--|--------------|-------------------|
| <i>Juncus elliotii</i> | S | | <i>Malanthemum canadense</i> | T | |
| Rush | | | Canada Mayflower | | |
| <i>Juncus longistylis</i> | S | | <i>Malus angustifolia</i> | S | |
| Rush | | | Crab Apple | | |
| <i>Koeleria cristata</i> | E | | <i>Malus toensis</i> | S | |
| June Grass | | | Crab Apple | | |
| <i>Lathyrus palustris</i> | S | | <i>Marshallia grandiflora</i> | E | C2 |
| Marsh Pea | | | Barbara's Buttons | | |
| <i>Lathyrus venosus</i> | S | | <i>Matelea carolinensis</i> | E | |
| Bushy Vetch | | | Carolina Anglepod | | |
| <i>Leavenworthia exigua</i> | | | <i>Mecardonia acuminata</i> | T | |
| var. <i>laciniata</i> | E | C1 | Mecardonia | | |
| Glade Cress | | | <i>Melampyrum lineare</i> | E | |
| <i>Leavenworthia torulosa</i> | E | | Cow Wheat | | |
| Glade Cress | | | <i>Melanthium virginicum</i> | E | |
| <i>Lelophyllum buxifolium</i> | E | | Bunch Flower | | |
| Sand Myrtle | | | <i>Minuartia glabra</i> | E | |
| <i>Lesquerella globosa</i> | T | C2 | Sandwort | | |
| Bladder-pod | | | <i>Mirabilis albidia</i> | S | |
| <i>Lesquerella lescurei</i> | E | | Four-o'clock | | |
| Bladder-pod | | | <i>Monarda punctata</i> | E | |
| <i>Leucothoe recurva</i> | E | | Dotted Monarda | | |
| Fetterbush | | | <i>Monarda russelliana</i> | S | |
| <i>Liatris microcephala</i> | S | | Russell's Horsemint | | |
| Blazing-star | | | <i>Monotropsis odorata</i> | T | |
| <i>Liatris pycnostachya</i> | E | | Sweet Pinesap | | |
| Prairie Blazing-star | | | <i>Muhlenbergia bushii</i> | S | |
| <i>Lilium philadelphicum</i> | S | | Bush's Satin Grass | | |
| Wood Lily | | | <i>Muhlenbergia cuspidata</i> | E | |
| <i>Lilium superbum</i> | T | | Prairie Satin Grass | | |
| Turk's-cap Lily | | | <i>Muhlenbergia expansa</i> | E | |
| <i>Limnoblum spongia</i> | T | | Hair Grass | | |
| Frog's Bit | | | <i>Muhlenbergia glabriflora</i> | S | |
| <i>Linum sulcatum</i> | E | | Hair Grass | | |
| Grooved Yellow Flax | | | <i>Myriophyllum heterophyllum</i> | S | |
| <i>Listera australis</i> | E | | Water Milfoil | | |
| Southern Twayblade | | | <i>Myriophyllum pinnatum</i> | S | |
| <i>Listera smallii</i> | T | | Water Milfoil | | |
| Small's Twayblade | | | <i>Najas gracillima</i> | S | |
| <i>Lobelia appendiculata</i> | | | Slender Nalad | | |
| var. <i>gattingeri</i> | E | C2 | <i>Nemophila aphylla</i> | S | |
| Gattinger's Lobelia | | | Nemophila | | |
| <i>Lobelia nuttallii</i> | T | | <i>Oenothera liliifolia</i> | T | |
| Nuttall's Lobelia | | | Thread-leaved Sundrops | | |
| <i>Lonicera prolifera</i> | S | | <i>Oenothera perennis</i> | E | |
| Grape Honeysuckle | | | Small Sundrops | | |
| <i>Ludwigia hirtella</i> | E | | <i>Oenothera triloba</i> | T | |
| False Loosestrife | | | Sundrops | | |
| <i>Lycopodium appressum</i> | E | | <i>Onosmodium hispidissimum</i> | E | |
| Southern Bog Clubmoss | | | Halcy False Gromwell | | |
| <i>Lysimachia fraseri</i> | E | | <i>Onosmodium molle</i> ssp. <i>molle</i> | E | |
| Fringed Loosestrife | | | Soft False Gromwell | | |
| <i>Lysimachia radicans</i> | E | | <i>Onosmodium molle</i> ssp. <i>occidentale</i> | E | |
| Creeping Fringed Loosestrife | | | Western False Gromwell | | |
| <i>Lysimachia terrestris</i> | S | | | | |
| Swamp Candles | | | | | |

| | KAS- KNPC | STATUS FEDERAL | | KAS- KNPC | STATUS FEDERAL |
|---|--------------|-------------------|----------------------------------|--------------|-------------------|
| <i>Orontium aquaticum</i> | T | | <i>Polygala cruciata</i> | E | |
| Golden Club | | | Cross Milkwort | | |
| <i>Oryzopsis racemosa</i> | T | | <i>Polygala nuttallii</i> | E | |
| Black-seeded Rice Grass | | | Nuttall's Milkwort | | |
| <i>Oxalis priceae</i> | E | | <i>Polygala polygama</i> | E | |
| Price's Yellow Wood Sorrel | | | Purple Milkwort | | |
| <i>Pachystima canbyi</i> | E | C2 | <i>Polymnia laevigata</i> | E | C2 |
| Mountain Lover | | | Leaf Cup | | |
| <i>Parnassia asarifolia</i> | E | | <i>Pontederia cordata</i> | S | |
| Ginger-leaved | | | Pickering Weed | | |
| Grass-of-Parnassus | | | <i>Potamogeton praelongus</i> | S | |
| <i>Parnassia grandifolia</i> | E | | Pond Weed | | |
| Grass-of-Parnassus | | | <i>Potamogeton pulcher</i> | S | |
| <i>Paronychia argyrocoma</i> | E | | Spotted Pondweed | | |
| Silver Whitlow-wort | | | <i>Prenanthes alba</i> | E | |
| <i>Paspalum boschanianum</i> | S | | Lion's Foot | | |
| Lens Grass | | | <i>Prenanthes aspera</i> | E | |
| <i>Paspalum distichum</i> | S | | Rough White Lettuce | | |
| Lens Grass | | | <i>Psoralea stipulata</i> | E | C1 |
| <i>Paspalum setaceum</i> var. | | | Scurf Pea | | |
| <i>psammophilum</i> | S | | <i>Psoralea tenuiflora</i> | E | |
| Lens Grass | | | Scurf Pea | | |
| <i>Pedicularis lanceolata</i> | E | | <i>Ptilimnium capilloceum</i> | T | |
| Swamp Wood Betony | | | Mock Bishop's-weed | | |
| <i>Perideridia americana</i> | T | | <i>Ptilimnium nuttallii</i> | E | |
| Perideridia | | | Mock Bishop's-weed | | |
| <i>Phacelia ranunculacea</i> | S | | <i>Pycnanthemum albescens</i> | E | |
| Phacelia | | | Mountain Mint | | |
| <i>Philadelphus hirsutus</i> | E | | <i>Pyrola americana</i> | E | |
| Mock Orange | | | Wintergreen | | |
| <i>Philadelphus inodorus</i> | E | | <i>Ranunculus allegheniensis</i> | T | |
| Mock Orange | | | Allegheny Crowfoot | | |
| <i>Philadelphus pubescens</i> | T | | <i>Ranunculus ambiguus</i> | S | |
| Mock Orange | | | Water Spearwort | | |
| <i>Phlox bifida</i> ssp. <i>stellaris</i> | T | C2 | <i>Rhododendron canadense</i> | E | |
| Cleft Phlox | | | Honeysuckle Bush | | |
| <i>Physostegia intermedia</i> | E | | <i>Rhynchosia tomentosa</i> | E | |
| False Dragonhead | | | Erect Rhynchosia | | |
| <i>Plantago cordata</i> | E | C2 | <i>Rhynchospora globularis</i> | E | |
| Heart-leaved Plantain | | | Grass Beak Rush | | |
| <i>Platanthera cristata</i> | E | | <i>Rhynchospora macrostachya</i> | E | |
| Crested Fringed Orchid | | | Horned Rush | | |
| <i>Platanthera integrilabia</i> | E | C2 | <i>Rubus whartoni</i> | S | C2 |
| White Fringeless Orchid | | | Wharton's Bramble | | |
| <i>Platanthera psycodes</i> | E | | <i>Rudbeckia subtomentosa</i> | T | |
| Purple Fringed Orchid | | | Sweet Coneflower | | |
| <i>Poa angustata</i> | E | | <i>Sabatia campanulata</i> | E | |
| Weak Bluegrass | | | Rose Pink | | |
| <i>Podostemon ceratophyllum</i> | T | | <i>Sagittaria brevirostris</i> | S | |
| Riverweed | | | Arrowhead | | |
| <i>Pogonia ophloglossoides</i> | E | | <i>Sagittaria graminea</i> | T | |
| Rose Pogonia | | | Grass-leaved Arrowhead | | |
| <i>Polemonium reptans</i> var. | | | <i>Salvia uralica</i> | E | |
| <i>villosum</i> | S | C2 | Sage | | |
| Hairy Jacob's Ladder | | | <i>Sambucus racemosa</i> | T | |
| | | | Red-berried Elder | | |

| | KAS- KNPC | STATUS FEDERAL | | KAS- KNPC | STATUS FEDERAL |
|---|--------------|-------------------|---|--------------|-------------------|
| <i>Sanguisorba canadensis</i> | E | | <i>Solidago spathulata</i> | S | |
| American Burnet | | | Goldenrod | | |
| <i>Saxifraga michauxii</i> | E | | <i>Solidago squarrosa</i> | E | |
| Michaux's Saxifrage | | | Squarrose Goldenrod | | |
| <i>Saxifraga micranthoidifolia</i> | E | | <i>Sparganium eurycarpum</i> | E | |
| Brook Lettuce | | | Common Bur Reed | | |
| <i>Schizachne purpurascens</i> | E | | <i>Sphenopholis pennsylvanica</i> | E | |
| False Melic | | | Swamp Oats | | |
| <i>Schwalbea americana</i> | E | C2 | <i>Spiraea alba</i> | E | |
| Chaffseed | | | Meadow Sweet | | |
| <i>Scirpus expansus</i> | S | | <i>Spiranthes lucida</i> | T | |
| Bulrush | | | Shining Ladies' Tresses | | |
| <i>Scirpus fluviatilis</i> | T | | <i>Spiranthes magnicamporum</i> | E | |
| Bulrush | | | Ladies' Tresses | | |
| <i>Scirpus hallii</i> | E | | <i>Spiranthes odorata</i> | E | |
| Bulrush | | | Sweet Lady's Tresses | | |
| <i>Scirpus heterochaetus</i> | E | | <i>Sporobolus clandestinus</i> | E | |
| Bulrush | | | Dropseed | | |
| <i>Scirpus microcarpus</i> | E | | <i>Sporobolus heterolepis</i> | E | |
| Bulrush | | | Prairie Dropseed | | |
| <i>Scleria ciliata</i> | E | | <i>Stachys eplingii</i> | S | |
| Nut Rush | | | Hedge-nettle | | |
| <i>Scutellaria leonardii</i> | S | | <i>Stellaria longifolia</i> | S | |
| Small Skullcap | | | Switchwort <i>Stitchwort</i> | | |
| <i>Sedum telephoides</i> | T | | <i>Streptopus roseus</i> | E | |
| Live Forever | | | Twisted Stalk | | |
| <i>Sida hermaphrodita</i> | E | | <i>Styrax grandifolia</i> | S | |
| Virginia Mallow | | | Storax | | |
| <i>Silene ovata</i> | T | | <i>Sullivantia sullivantii</i> | E | |
| Catchfly | | | Sullivant's Sullivantia | | |
| <i>Silene regia</i> | E | C2 | <i>Symphoricarpos albus</i> | E | |
| Royal Catchfly | | | Snowberry | | |
| <i>Silphium laciniatum</i> | S | | <i>Synandra hispidula</i> | -- | C2 |
| Compass Plant | | | Synandra | | |
| <i>Silphium terebinthinaceum</i> var. | | | <i>Taxus canadensis</i> | S | |
| <i>lucy-brauniae</i> | S | | Canadian Yew | | |
| Lucy Braun's Prairie Dock | | | <i>Tephrosia spicata</i> | E | |
| <i>Smilacina stellata</i> stellata <i>stellata</i> | E | | Goat's-rue | | |
| Starry-flowered False Solomon's | | | <i>Thalictrum coriaceum</i> | E | |
| Seal | | | Maid-of-the-Mist | | |
| <i>Solidago albopilosa</i> | E | C1 | <i>Thalictrum mirabile</i> | S | |
| White-haired Goldenrod | | | Meadow Rue | | |
| <i>Solidago buckleyi</i> | S | | <i>Thlaspi pinnatifidum</i> | S | |
| Buckley's Goldenrod | | | Cutleaf Meadow Parsnip | | |
| <i>Solidago curtisii</i> | S | | <i>Thermopsis mollis</i> | E | |
| Curtis' Goldenrod | | | Bush Pea | | |
| <i>Solidago puberula</i> | T | | <i>Thuja occidentalis</i> | S | |
| Puberulent Goldenrod | | | Northern White Cedar | | |
| <i>Solidago radula</i> | E | | <i>Torreyochloa pallida</i> | E | |
| Rough Goldenrod | | | Pale Manna Grass | | |
| <i>Solidago roanensis</i> | T | | <i>Trepocarpus aethusae</i> | E | |
| Roan Mountain Goldenrod | | | Trepocarpus | | |
| <i>Solidago rupestris</i> | E | | <i>Trichomanes boschianum</i> | S | |
| Goldenrod | | | Filmy Fern | | |
| <i>Solidago shortii</i> | E | E | <i>Trichostema setaceum</i> | S | |
| Short's Goldenrod | | | Blue Curl | | |

| | KAS- KNPC | STATUS FEDERAL | | KAS- KNPC | STATUS FEDERAL |
|---------------------------------------|--------------|-------------------|--------------------------------|--------------|-------------------|
| <i>Typhlichthys subterraneus</i> | S | | <i>Pituophis melanoleucus</i> | S | |
| Southern cavefish | | | Pine Snake | | |
| <i>Umbra limi</i> | T | | <i>Sistrurus millarius</i> | T | |
| Central mudminnow | | | Pigmy Rattlesnake | | |
| AMPHIBIANS | | | <i>Thamnophis proximus</i> | T | |
| <i>Ambystoma platineum</i> | E | | Western Ribbon Snake | | |
| Silvery Salamander | | | <i>Thamnophis sauritus</i> | S | |
| <i>Amphiuma tridactylum</i> | E | | Eastern Ribbon Snake | | |
| Three-toed Amphiuma | | | <i>Trionyx muticus</i> | S | |
| <i>Aneides aeneus</i> | -- | C2 | Smooth Softshell | | |
| Green Salamander | | | | | |
| <i>Cryptobranchus alleganiensis</i> | -- | C2 | | | |
| Hellbender | | | BIRDS | | |
| <i>Eurycea longicauda</i> | | | <i>Accipiter cooperii</i> | S | |
| <i>guttolineata</i> | T | | Cooper's Hawk | | |
| Three-lined Salamander | | | <i>Accipiter striatus</i> | S | |
| <i>Hyla aveloca</i> | T | | Sharp-shinned Hawk | | |
| Blind-voiced Treefrog | | | <i>Actitis macularia</i> | E | |
| <i>Hyla cinerea</i> | S | | Spotted Sandpiper | | |
| Green Treefrog | | | <i>Amphispiza aestivalis</i> | T | C2 |
| <i>Hyla versicolor</i> | S | | Bachman's Sparrow | | |
| Gray Treefrog | | | <i>Ammodramus henslowii</i> | S | |
| <i>Plethodon cinereus</i> | S | | Henslow's Sparrow | | |
| Redback Salamander | | | <i>Anas discors</i> | E | |
| <i>Plethodon wehrlei</i> | E | | Blue-winged Teal | | |
| Wehrle's Salamander | | | <i>Anhinga anhinga</i> | E | |
| <i>Rana pipiens</i> | S | | Anhinga | | |
| Northern Leopard Frog | | | <i>Ardea herodias</i> | S | |
| REPTILES | | | Great Blue Heron | | |
| <i>Chrysemys picta dorsalis</i> | S | | <i>Bartramia longicauda</i> | E | |
| Southern Painted Turtle | | | Upland Sandpiper | | |
| <i>Colaptes auratus</i> | E | C2 | <i>Botaurus lentiginosus</i> | E | |
| Kirtland's Snake | | | American Bittern | | |
| <i>Elaphe guttata</i> | S | | <i>Bubulcus ibis</i> | S | |
| Corn Snake | | | Cattle Egret | | |
| <i>Emmeces anthracinus</i> | | | <i>Campephilus principalis</i> | -- | E |
| <i>anthracinus</i> | S | | Ivory-billed Woodpecker | | |
| Northern Coal Skink | | | <i>Casmerodius albus</i> | E | |
| <i>Emmeces anthracinus pluvialis</i> | E | | Great Egret | | |
| Southern Coal Skink | | | <i>Charadrius melodus</i> | -- | T |
| <i>Furcula abacura</i> | S | | Piping Plover | | |
| Mud Snake | | | <i>Chondestes grammacus</i> | T | |
| <i>Lampropeltis triangulum</i> | | | Lark Sparrow | | |
| <i>elapsoides</i> | S | | <i>Cistothorus platensis</i> | S | |
| Scarlet Kingsnake | | | Sedge Wren | | |
| <i>Macrochelys temminckii</i> | T | C2 | <i>Corvus corax</i> | E | |
| Alligator Snapping Turtle | | | Common Raven | | |
| <i>Masticophis flagellum</i> | E | | <i>Corvus ossifragus</i> | S | |
| Coachwhip | | | Fish Crow | | |
| <i>Nerodia cyclopion</i> | E | | <i>Dendroica fusca</i> | T | |
| Green Water Snake | | | Blackburnian Warbler | | |
| <i>Nerodia erythrogaster neglecta</i> | S | C2 | <i>Dendroica kirtlandii</i> | -- | E |
| Copperbelly Water Snake | | | Kirtland's Warbler | | |
| <i>Nerodia fasciata</i> | E | | <i>Dolichonyx oryzivorus</i> | S | |
| Southern Water Snake | | | Bobolink | | |
| <i>Ophisaurus attenuatus</i> | S | | <i>Egretta caerulea</i> | E | |
| Slender Glass Lizard | | | Little Blue Heron | | |

| | KAS- KNPC | STATUS FEDERAL | | KAS- KNPC | STATUS FEDERAL |
|--|--------------|-------------------|-------------------------------------|--------------|-------------------|
| <i>Elanoides forficatus forficatus</i> | -- | C2 | <i>Wilsonia canadensis</i> | S | |
| American Swallow-tailed Kite | | | Canada Warbler | | |
| <i>Empidonax minimus</i> | T | | | | |
| Least Flycatcher | | | MAMMALS | | |
| <i>Falco peregrinus</i> | E | E | <i>Clethrionomys gapperi maurus</i> | S | C2 |
| Peregrine Falcon | | | Gapper's Red-backed Mouse | | |
| <i>Fulica americana</i> | E | | <i>Felis concolor cougar</i> | E | E |
| American Coot | | | Mountain Lion | | |
| <i>Gallinula chloropus</i> | E | | <i>Lutra canadensis</i> | S | |
| Common Mooten | | | River Otter | | |
| <i>Haliaeetus leucocephalus</i> | E | E | <i>Microsorex hoyi winnemana</i> | -- | C2 |
| Bald Eagle | | | Pygmy Shrew | | |
| <i>Ictinia mississippiensis</i> | S | | <i>Mustela nivalis</i> | S | |
| Mississippi Kite | | | Least Weasel | | |
| <i>Ixobrychus exilis</i> | E | | <i>Myotis austroriparius</i> | E | C2 |
| Least Bittern | | | Southeastern Myotis | | |
| <i>Junco hyemalis</i> | S | | <i>Myotis grisescens</i> | E | E |
| Dark-eyed Junco | | | Gray Myotis | | |
| <i>Lanius ludovicianus migrans</i> | -- | C2 | <i>Myotis keenii</i> | S | |
| Migrant Loggerhead Shrike | | | Keen's Myotis | | |
| <i>Lophodytes cucullatus</i> | E | | <i>Myotis sodalis</i> | E | E |
| Hooded Merganser | | | Indiana Myotis | | |
| <i>Nycticorax nycticorax</i> | E | | <i>Myotis subulatus leibii</i> | E | C2 |
| Black-crowned Night-Heron | | | Small-footed Myotis | | |
| <i>Nycticorax violaceus</i> | T | | <i>Neotoma floridana magister</i> | -- | C2 |
| Yellow-crowned Night-Heron | | | Eastern Wood Rat | | |
| <i>Pandion haliaetus</i> | E | | <i>Nycticeius humeralis</i> | T | |
| Osprey | | | Evening Bat | | |
| <i>Passerculus sandwichensis</i> | S | | <i>Peromyscus gossypinus</i> | S | |
| Savannah Sparrow | | | Cotton Mouse | | |
| <i>Phalacrocorax auritus</i> | E | | <i>Plecotus rafinesquii</i> | T | C2 |
| Double-crested Cormorant | | | Rafinesque's Big-eared Bat | | |
| <i>Pheucticus ludovicianus</i> | S | | <i>Plecotus townsendii</i> | | |
| Rose-breasted Grosbeak | | | virginianus | E | E |
| <i>Picoides borealis</i> | E | E | Virginia Big-eared Bat | | |
| Red-cockaded Woodpecker | | | <i>Sorex cinereus</i> | S | |
| <i>Podilymbus podiceps</i> | E | | Masked Shrew | | |
| Pied-billed Grebe | | | <i>Sorex dispar</i> | E | C2 |
| <i>Poocetes gramineus</i> | S | | Long-tailed Shrew | | |
| Vesper Sparrow | | | <i>Spilogale putorius</i> | S | |
| <i>Rallus elegans</i> | E | | Spotted Skunk | | |
| King Rail | | | <i>Sylvilagus aquaticus</i> | S | |
| <i>Riparia riparia</i> | S | | Swamp Rabbit | | |
| Bank Swallow | | | <i>Sylvilagus transilionalis</i> | E | C2 |
| <i>Sterna antillarum athalassos</i> | E | E | New England Cottontail | | |
| Interior Least Tern | | | <i>Ursus americanus</i> | E | |
| <i>Thryomanes bewickii</i> | S | C2 | Black Bear | | |
| Bewick's Wren | | | | | |
| <i>Tyto alba</i> | S | | | | |
| Common Barn-Owl | | | | | |
| <i>Vermivora bachmanii</i> | E | E | | | |
| Bachman's Warbler | | | | | |
| <i>Vermivora chrysoptera</i> | S | | | | |
| Golden-winged Warbler | | | | | |
| <i>Vireo bellii</i> | S | | | | |
| Bell's Vireo | | | | | |

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POTENTIAL HAZARDOUS WASTE SITE
PRELIMINARY ASSESSMENT
PART 1 - SITE INFORMATION AND ASSESSMENT

I. IDENTIFICATION

01 STATE 02 SITE NUMBER
KY D980557078

II. SITE NAME AND LOCATION

01 SITE NAME (Legal, common, or descriptive name of site)
Mobile Waste Control of Kentucky

02 STREET, ROUTE NO., OR SPECIFIC LOCATION IDENTIFIER
7500 GRADE LANE

03 CITY
Louisville

04 STATE 05 ZIP CODE 06 COUNTY 07 COUNTY CODE 08 CONG DIST
KY 40219 Jefferson

09 COORDINATES LATITUDE LONGITUDE
38 08 30. 85 43 00

10 DIRECTIONS TO SITE (Starting from nearest public road)
TAKE I-65 South out of Louisville EXIT ON to Outer Loop West, 1st entrance
ON Right IS MAIN OFFICE

III. RESPONSIBLE PARTIES

01 OWNER (If known)
Waste Management Company

02 STREET (Business, mailing, residential)
2673 Outer Loop Road

03 CITY
Louisville

04 STATE 05 ZIP CODE 06 TELEPHONE NUMBER
KY 40219 (502) 966-0272

07 OPERATOR (If known and different from owner)
Skird Robinson - Cecil Ihglehart

08 STREET (Business, mailing, residential)
Same

09 CITY
Same

10 STATE 11 ZIP CODE 12 TELEPHONE NUMBER
Same Same Same

13 TYPE OF OWNERSHIP (Check one)
☒ A PRIVATE ☐ B FEDERAL (Agency name) ☐ C STATE ☐ D COUNTY ☐ E MUNICIPAL
☐ F OTHER (Specify) ☐ G UNKNOWN

14 OWNER/OPERATOR NOTIFICATION ON FILE (Check all that apply)

☐ A RCRA 3001 DATE RECEIVED MONTH DAY YEAR ☒ B UNCONTROLLED WASTE SITE (RCRA 103(c)) DATE RECEIVED MONTH DAY YEAR ☐ C. NONE

IV. CHARACTERIZATION OF POTENTIAL HAZARD

01 ON SITE INSPECTION
☒ YES DATE 11, 7, 88 MONTH DAY YEAR
☐ NO

02 BY (Check all that apply)
☐ A EPA ☐ B EPA CONTRACTOR ☒ C STATE ☐ D OTHER CONTRACTOR
☐ E LOCAL HEALTH OFFICIAL ☐ F OTHER (Specify)

CONTRACTOR NAME(S)

02 SITE STATUS (Check one)
☐ A ACTIVE ☒ B INACTIVE ☐ C UNKNOWN

03 YEARS OF OPERATION
1969 BEGINNING YEAR ENDING YEAR ☐ UNKNOWN

04 DESCRIPTION OF SUBSTANCES POSSIBLY PRESENT, KNOWN, OR ALLEGED
VMP NAPHA, TOLUENE, CADMIUM, LEAD

05 DESCRIPTION OF POTENTIAL HAZARD TO ENVIRONMENT AND OR POPULATION

Surface + Groundwater contamination

V. PRIORITY ASSESSMENT

01 PRIORITY FOR INSPECTION (Check one. If high or medium is checked, complete Part 2: Waste Information and Part 3: Description of Hazardous Conditions and Incidents)
☐ A HIGH (Inspection required promptly) ☐ B MEDIUM (Inspection required) ☐ C LOW (Inspect on time available basis) ☒ D NONE (No further action needed, complete current disposition form)

VI. INFORMATION AVAILABLE FROM

01 CONTACT
Robert Keiser

02 OF (Agency Designation)
KYN REPC

03 TELEPHONE NUMBER
(502) 564-6716

04 PERSON RESPONSIBLE FOR ASSESSMENT
WASTE MGT

05 AGENCY
UNCONTROLLED SITES

06 ORGANIZATION
1

07 TELEPHONE NUMBER
1

08 DATE
11, 15, 88 MONTH DAY YEAR

REGION IV RCRA/NPL POLICY QUESTIONNAIRE FOR INITIAL SCREENING

Site Name Mobile Waste Control of Kentucky

City LOUISVILLE State Ky

Facility I.D. Number KYD 980557078

Type of Facility: Generator _____ Transporter _____ TSD _____

I. RCRA APPLICABILITY

| | yes | no |
|--|-------|-------|
| Does the facility have RCRA interim status? | _____ | _____ |
| Does the facility have a final or post-closure permit? If so, date issued _____ | _____ | _____ |
| Is the facility a non-notifier that has been identified by States or EPA? | _____ | _____ |
| Is the facility a known or possible protective filer? | _____ | _____ |
| Have RCRA wastes been stored onsite for longer than 90 days since November 19, 1980? | _____ | _____ |
| Have RCRA wastes been disposed onsite since November 19, 1980? | _____ | _____ |

STOP HERE IF ALL ANSWERS TO QUESTIONS IN SECTION I ARE NO

II. FINANCIAL STATUS

| | yes | no |
|--|-------|-------|
| Is the facility owned by an entity that has filed for bankruptcy under federal laws (Chapter 7 or 11) or State laws? | _____ | _____ |
| If yes, what has it filed under? | | |
| Chapter 7 _____ Chapter 11 _____ Other _____ | | |

III. ENFORCEMENT

RCRA Status

yes no

Has the facility lost authorization to operate via
LOIS, 3005(c) permit denial, 3008(h) IS termination,
3005(d) permit revocation? _____

Has the facilities interim status been terminated via
another mechanism (i.e. administrative termination)? _____

IV. CERCLA STATUS

What CERCLA financed remedial or removal activities have been initiated
at the site? (RI/FS, RD/RA, O&M, forward planning, and removal; does not
include enforcement or PA/SI activities).

V. Enforcement Status

yes no

In general, would you characterize the facility as
demonstrating an unwillingness to undertake corrective
action based on prior State, CERCLA or RCRA actions? _____

If yes, please describe and cite the authorities exercised.

yes no

Is the owner/operator a party to any enforcement action
at the site? _____

If not, why not?

Are any PRPs (including owner/operators) undertaking remedial studies or
action in response to CERCLA enforcement authorities? What is the extent/
type of work that has been completed (RI/FS, etc.) and who (generators,
owner/operator, etc.) is conducting the work?

NOT FOR PUBLIC INSPECTION
NOT FOR PUBLIC INSPECTION

Facility name: Mobile Waste Control of Kentucky

Location: Louisville, Jefferson County Kentucky

EPA Region: IV

Person(s) in charge of the facility: Waste Management Company

Skird Robinson - Cecil Ingelhart

Name of Reviewer: Robert Keiser

Date: 11-10-88

General description of the facility:

(For example: landfill, surface impoundment, pile, container; types of hazardous substances; location of the facility; contamination route of major concern; types of information needed for rating; agency action, etc.)

This Landfill started in 1969. Received numerous types of wastes including Cadmium, Lead, VM+P Naptha and Toluene. IT IS LOCATED AT 7500 Grade Lane Just North of the Outer Loop. Surface + Groundwater are the routes of major concern.

NOT FOR PUBLIC INSPECTION

| Observed | Not Observed |
|---|---|
| Scores: $S_M = 3.5$ ($S_{gw} = 6.1$ $S_{sw} = 0$ $S_a = N/A$) | $S_M = 1.4$ ($S_{gw} = 2.4$ $S_{sw} = 0$ $S_a = N/A$) |
| $S_{FE} = N/A$ | $S_{FE} = N/A$ |
| $S_{DC} = 25.0$ | $S_{DC} = 16.6$ |

HRS COVER SHEET

| Ground Water Route Work Sheet | | | | OBSERVED | | NOT OBSERVED | |
|---|---|-----------------|-----------|---------------|------|--------------|--|
| Rating Factor | Assigned Value (Circle One) | Multi- plier | Score | Max. Score | | | |
| [1] Observed Release | 0 45 | 1 | 45 | 45 | 0 | | |
| If observed release is given a score of 45, proceed to line [4]. If observed release is given a score of 0, proceed to line [2]. | | | | | | | |
| [2] Route Characteristics | | | | | | | |
| Depth to Aquifer of Concern | 0 1 2 3 | 2 | 4 | 8 | | | |
| Net Precipitation | 0 1 2 3 | 1 | 2 | 3 | | | |
| Permeability of the Unsaturated Zone | 0 1 2 3 | 1 | 0 | 3 | | | |
| Physical State | 0 1 2 3 | 1 | 3 | 3 | | | |
| Total Route Characteristics Score | | | 9 | 15 | | | |
| [3] Containment | 0 1 2 3 | 1 | 2 | 3 | | | |
| [4] Waste Characteristics | | | | | | | |
| Toxicity/Persistence | 0 3 6 9 12 15 18 | 1 | 18 | 18 | | | |
| Hazardous Waste Quantity | 0 1 2 3 4 5 6 7 8 | 1 | 8 | 8 | | | |
| NOT FOR PUBLIC INSPECTION | | | | | | | |
| Total Waste Characteristics Score | | | 26 | 28 | | | |
| [5] Targets | | | | | | | |
| Ground Water Use | 0 1 2 3 | 3 | 3 | 9 | | | |
| Distance to Nearest Well/Population Served | 0 4 6 8 10 12 16 18 20 24 30 32 35 40 | 1 | 0 | 40 | | | |
| Total Targets Score | | | 3 | 49 | | | |
| [6] If line [1] is 45, multiply [1] x [2] x [5] If line [1] is 0, multiply [2] x [3] x [4] x [5] | | | 3510 | 57,330 | 1404 | | |
| [7] Divide line [6] by 57,330 and multiply by 100 | | | Sgw = 6.1 | | 2.4 | | |

* Received waste from several companies over
A number of years

21 to 75

5 to 15

CLAY 10-?

LIQUID + SOLID

NON PERMEABLE - NO Ponds

LEAD Among others

UNABLE
to determine

GW NOT used

> 3 miles

0 population

| Surface Water Route Work Sheet | | | | OBSERVED | NOT OBSERVED |
|---|--|-------------|---------------------|------------|--------------|
| Rating Factor | Assigned Value (Circle One) | Multi-plier | Score | Max. Score | |
| [1] Observed Release | 0 45 | 1 | 45 | 45 | 0 |
| If observed release is given a value of 45, proceed to line [4] . If observed release is given a value of 0, proceed to line [2] . | | | | | |
| [2] Route Characteristics | | | | | |
| Facility Slope and Intervening Terrain | (0) 1 2 3 | 1 | 0 | 3 | |
| 1-yr. 24-hr. Rainfall | 0 1 (2) 3 | 1 | 2 | 3 | |
| Distance to Nearest Surface Water | 0 1 2 (1) | 2 | 6 | 8 | |
| Physical State | 0 1 2 (3) | 1 | 3 | 3 | |
| Total Route Characteristics Score | | | 11 | 15 | |
| [3] Containment | 0 1 (2) 3 | 1 | 2 | 3 | |
| [4] Waste Characteristics | | | | | |
| Toxicity/Persistence | 0 3 6 9 12 15 (18) | 1 | 18 | 18 | |
| Hazardous Waste Quantity | 0 1 2 3 4 5 6 7 (8) | 1 | 8 | 8 | |
| NOT FOR PUBLIC INSPECTION | | | | | |
| Total Waste Characteristics Score | | | 26 | 26 | |
| [5] Targets | | | | | |
| Surface Water Use | (0) 1 2 3 | 3 | 0 | 9 | |
| Distance to a Sensitive Environment | (0) 1 2 3 | 2 | 0 | 6 | |
| Population Served/Distance to Water Intake Downstream | (1) 4 6 8 10 12 16 18 20 24 30 32 35 40 | 1 | 0 | 40 | |
| Total Targets Score | | | 0 | 55 | |
| [6] If line [1] is 45, multiply [1] x [4] x [5] If line [1] is 0, multiply [2] x [3] x [4] x [5] | | | 0 | 64,350 | 0 |
| [7] Divide line [6] by 64,350 and multiply by 100 | | | S _{sw} = 0 | | 0 |

≤ 3%

2.1 to 3

< 1000'

Liquid

Same

LEAD


SAME AS GW

DRAINAGE DITCHES

NO USES

> 1 mile

> 15 miles to
WTAKE

| | S | | S ² | |
|---|--|--------------|----------------|--------------|
| | OBSERVED | NOT OBSERVED | OBSERVED | NOT OBSERVED |
| Groundwater Route Score (S _{gw}) | 6.1 | 2.4 | 37.2 | 5.8 |
| Surface Water Route Score (S _{sw}) | 0 | 0 | 0 | 0 |
| Air Route Score (S _a) | N/A | N/A | N/A | N/A |
| $S_{gw}^2 + S_{sw}^2 + S_a^2$ |  | | 37.2 | 5.8 |
| $\sqrt{S_{gw}^2 + S_{sw}^2 + S_a^2}$ | | | 6.1 | 2.4 |
| $\sqrt{S_{gw}^2 + S_{sw}^2 + S_a^2} / 1.73 = S_M =$ | | | 3.5 | 1.4 |

WORKSHEET FOR COMPUTING S_M

NOT FOR PUBLIC INSPECTION

| Direct Contact Work Sheet | | | | | Observed | Not Observed |
|---|------------------------------------|--|------------|------------|------------|--------------|
| Rating Factor | Assigned Value (Circle One) | | Multiplier | Score | Max. Score | |
| <input type="checkbox"/> 1 Observed Incident | 0 | 45 | 1 | 45 | 45 | 0 |
| If line <input type="checkbox"/> 1 is 45, proceed to line <input type="checkbox"/> 4 If line <input type="checkbox"/> 1 is 0, proceed to line <input type="checkbox"/> 2 | | | | | | |
| <input type="checkbox"/> 2 Accessibility | 0 | 1 <input checked="" type="radio"/> 2 3 | 1 | 2 | 3 | |
| <input type="checkbox"/> 3 Containment | 0 | <input checked="" type="radio"/> 15 | 1 | 15 | 15 | |
| <input type="checkbox"/> 4 Waste Characteristics Toxicity | 0 | 1 2 <input checked="" type="radio"/> 3 | 5 | 15 | 15 | |
| <input type="checkbox"/> 5 Targets | | | | | | |
| Population Within a 1-Mile Radius | 0 | 1 <input checked="" type="radio"/> 2 3 4 5 | 4 | 8 | 20 | |
| Distance to a Critical Habitat | <input checked="" type="radio"/> 0 | 1 2 3 | 4 | 0 | 12 | |
| NOT FOR PUBLIC INSPECTION | | | | | | |
| Total Targets Score | | | | 8 | 32 | |
| <input type="checkbox"/> 6 If line <input type="checkbox"/> 1 is 45, multiply <input type="checkbox"/> 1 x <input type="checkbox"/> 4 x <input type="checkbox"/> 5 If line <input type="checkbox"/> 1 is 0, multiply <input type="checkbox"/> 2 x <input type="checkbox"/> 3 x <input type="checkbox"/> 4 x <input type="checkbox"/> 5 | | | | 5400 | 21,600 | 3600 |
| <input type="checkbox"/> 7 Divide line <input type="checkbox"/> 6 by 21,600 and multiply by 100 | | | | SDC = 25.0 | | 16.6 |

BARRIERS

LEAD

101 to 1000

7/mile

| Fire and Explosion Work Sheet | | | | | | | |
|--|--------------------------------|-----------------|-------|---------------|-------------------|--|--|
| Rating Factor | Assigned Value (Circle One) | Multi- plier | Score | Max. Score | Rel. (Section) | | |
| [1] Containment | 1 3 | 1 | | 3 | 7.1 | | |
| [2] Waste Characteristics | | | | | 7.2 | | |
| Direct Evidence | 0 3 | 1 | | 3 | | | |
| Ignitability | 0 1 2 3 | 1 | | 3 | | | |
| Reactivity | 0 1 2 3 | 1 | | 3 | | | |
| Incompatibility | 0 1 2 3 | 1 | | 3 | | | |
| Hazardous Waste Quantity | 0 1 2 3 4 5 6 7 8 | 1 | | 8 | | | |
| NOT FOR PUBLIC INSPECTION | | | | | | | |
| Total Waste Characteristics Score | | | | 20 | | | |
| [3] Targets | | | | | 7.3 | | |
| Distance to Nearest Population | 0 1 2 3 4 5 | 1 | | 5 | | | |
| Distance to Nearest Building | 0 1 2 3 | 1 | | 3 | | | |
| Distance to Sensitive Environment | 0 1 2 3 | 1 | | 3 | | | |
| Land Use | 0 1 2 3 | 1 | | 3 | | | |
| Population Within 2-Mile Radius | 0 1 2 3 4 5 | 1 | | 5 | | | |
| Buildings Within 2-Mile Radius | 0 1 2 3 4 5 | 1 | | 5 | | | |
| N/A | | | | | | | |
| Total Targets Score | | | | 24 | | | |
| [4] Multiply [1] x [2] x [3] | | | | 1,440 | | | |
| [5] Divide line [4] by 1,440 and multiply by 100 SFE = | | | | | | | |

| Air Route Work Sheet | | | | | | |
|--|--------------------------------|-----------------|-------|---------------|-------------------|--|
| Rating Factor | Assigned Value (Circle One) | Multi- plier | Score | Max. Score | Ref. (Section) | |
| [1] Observed Release | 0 45 | 1 | | 45 | 5.1 | |
| Date and Location: | | | | | | |
| Sampling Protocol: | | | | | | |
| If line [1] is 0, the $S_a = 0$. Enter on line [5] If line [1] is 45, then proceed to line [2] | | | | | | |
| [2] Waste Characteristics | | | | | 5.2 | |
| Reactivity and Incompatibility | 0 1 2 3 | 1 | | 3 | | |
| Toxicity | 0 1 2 3 | 3 | | 9 | | |
| Hazardous Waste Quantity | 0 1 2 3 4 5 6 7 8 | 1 | | 8 | | |
| N/A | | | | | | |
| Total Waste Characteristics Score | | | | 20 | | |
| [3] Targets | | | | | 5.3 | |
| Population Within 4-Mile Radius | 0 9 12 15 18 21 24 27 30 | 1 | | 30 | | |
| Distance to Sensitive Environment | 0 1 2 3 | 2 | | 6 | | |
| Land Use | 0 1 2 3 | 1 | | 3 | | |
| NOT FOR PUBLIC INSPECTION | | | | | | |
| Total Targets Score | | | | 39 | | |
| [4] Multiply [1] x [2] x [3] | | | | 35,100 | | |
| [5] Divide line [4] by 35,100 and multiply by 100 | | | | $S_a =$ | | |

REGION: 04
STATE: KY

U.S. ENVIRONMENTAL PROTECTION AGENCY
OFFICE OF EMERGENCY AND REMEDIAL RESPONSE
C E R C L A

PAGE: 134
RUN DATE: 85/08/27
RUN TIME: 11:09:36

4.2 - SITE MAINTENANCE FORM

| | | |
|--|-------------------------|-----------------------------------|
| | | * ACTION: * |
| FPA ID: KY0068347632 | | |
| SITE NAME: MOBILE WASTE CONTROL OF KY LDPL | SOURCE: R | * _____ * |
| STREET: 2673 OUTER LOOP RD | CONG DIST: 04 | * _____ * |
| CITY: LOUISVILLE | ZIP: 40219 | * _____ * |
| CNTY NAME: JEFFERSON | CNTY CODE: 111 | * _____ * |
| LATITUDE: 38/08/30.0 | LONGITUDE: 085/43/00.0 | * ____/____/____ ____/____/____ * |
| SMSA: 4520 | HYDRO UNIT: 05140102 | * _____ * |
| INVENTORY IND: Y | REMEDIAL IND: Y | REMOVAL IND: N |
| FED FAC IND: N | * - - - - * | |
| EPL IND: I | NPL LISTING DATE: _____ | NPL DELISTING DATE: _____ |
| * - ____/____ ____/____ * | | |
| APPROACH: _____ | SITE CLASS: _____ | * ____ * |
| SITE/SPILL IDS: _____ | | * ____ * |
| RPM NAME: _____ | RPM PHONE: - - | * _____ * |
| DIOXIN TIER: _____ | REG FLD1: _____ | REG FLD2: _____ |
| * _____ * | | |
| PESP TERM: PENDING (X) | NO FURTHER ACTION () | |
| * PENDING (X) NO FURTHER ACTION () * | | |
| ENF DISP: NO VIABLE RESP PARTY () | | VOLUNTARY RESPONSE () |
| * - - * | | |
| ENFORCED RESPONSE () | | COST RECOVERY () |
| * - - * | | |

SITE DESCRIPTION:

| |
|-----------|
| * _____ * |
| * _____ * |
| * _____ * |
| * _____ * |

REGION: 04
STATE: KY

U.S. ENVIRONMENTAL PROTECTION AGENCY
OFFICE OF EMERGENCY AND REMEDIAL RESPONSE
C E R C L A

PAGE: 135
RUN DATE: 05/08/27
RUN TIME: 11:09:36

0.2 - ALIAS/ALIAS LOCATION MAINTENANCE FORM

* ACTION: -

SITE: MOBILE WASTE CONTROL OF KY LOFL

EPA ID: KY0068347632 ALIAS SEQ NO: 01

ALIAS NAME: MOBILE WASTE CONTROL

SOURCE: P

ALIAS LOCATION

* ACTION: -

CONTIGUOUS PORTION OF SITE? C

STREET: 7100 GRADE DR

CONG DIST: 04

CITY: LOUISVILLE

ST: KY ZIP: 40213

CNTY NAME: JEFFERSON

CNTY CODE: 111

LATITUDE: 38/11/42.0

LONGITUDE: 085/42/42.0

SMSA: 4520

HYDRO UNIT: 05140101

ALIAS DESCRIPTION:

DELETED KYD980501266 AND ADDED AS ALIAS TO KYD068347632 AT

REQUEST OF EPA SITE SCREENER.

REGION: 04
STATE: KY

U.S. ENVIRONMENTAL PROTECTION AGENCY
OFFICE OF EMERGENCY AND REMEDIAL RESPONSE
C E R C L A

PAGE: 136
RUN DATE: 85/08/27
RUN TIME: 11:09:36

N.2 - ALIAS/ALIAS LOCATION MAINTENANCE FORM

* ACTION: _

SITE: MOBILE WASTE CONTROL OF KY LDFL

EPA ID: KYDC68347632 ALIAS SEQ NO: 02

ALIAS NAME: MOBILE WASTE CONTROLS OF KY

SOURCE: R

ALIAS LOCATION

* ACTION: _

CONTIGUOUS PORTION OF SITE? C

STREET: 1901 OUTER LOOP

CONG DIST: 04

CITY: LOUISVILLE

ST: KY ZIP: 40219

CNTY NAME: JEFFERSON

CNTY CODE: 111

LATITUDE: 38/08/12.0

LONGITUDE: 085/41/18.0

SMSA: 4520

HYDRO UNIT: 05140102

ALIAS DESCRIPTION:

* _____ *

* _____ *

* _____ *

* _____ *

REGION: 04
STATE: KY

U.S. ENVIRONMENTAL PROTECTION AGENCY
OFFICE OF EMERGENCY AND REMEDIAL RESPONSE
C E R C L A

PAGE: 137
RUN DATE: 85/08/27
RUN TIME: 11109136

2 - ALIAS/ALIAS LOCATION MAINTENANCE FORM

* ACTION: _

SITE: MOBILE WASTE CONTROL OF KY LOFL

EPA ID: KY0068347632 ALIAS SEQ NO: 03

ALIAS NAME: OUTER LOOP LOFL

SOURCE: P

ALIAS LOCATION

CONTIGUOUS PORTION OF SITE? C

STREET: 1901 OUTER LOOP

CONG DIST: 04

CITY: LOUISVILLE

ST: KY ZIP: 40219

CNTY NAME: JEFFERSON

CLTY CODE: 111

LATITUDE: 38/08/12.0

LONGITUDE: 085/41/18.0

SMSA: 4520

HYDRO UNIT: 05140102

ALIAS DESCRIPTION:

* _____ *

* _____ *

* _____ *

* _____ *

REGION: 04
STATE : KY

U.S. ENVIRONMENTAL PROTECTION AGENCY
OFFICE OF EMERGENCY AND REMEDIAL RESPONSE
C E R C L A

PAGE: 138
RUN DATE: 85/08/27
RUN TIME: 11:09:36

M.2 - PROGRAM MAINTENANCE FORM

* ACTION: *

SITE: MOBILE WASTE CONTROL OF KY LOFL

EPA ID: KY068347632 PROGRAM CODE: H01 PROGRAM TYPE: *

PROGRAM QUALIFIER: ALIAS LINK ; *

PROGRAM NAME: SITE EVALUATION *

DESCRIPTION:

*
*
*
*

REGION: 04
STATE: KY

U.S. ENVIRONMENTAL PROTECTION AGENCY
OFFICE OF EMERGENCY AND REMEDIAL RESPONSE
C E E C L A

PAGE: 139
RUN DATE: 85/08/27
RUN TIME: 11:09:36

M.2 - EVENT MAINTENANCE FORM

* ACTION: -

SITE: MOBILE WASTE CONTROL OF KY LOFL
PROGRAM: SITE EVALUATION

EPA ID: FYP068347632 PROGRAM CODE: H01 EVENT TYPE: PA1

FMS CODE: EVENT QUALIFIER: EVENT LEAD: S

EVENT NAME: PRELIMINARY ASSESSMENT STATUS:

DESCRIPTION:

*
*
*
*
*

ORIGINAL

CURRENT

ACTUAL

START: START: START: 85/05/09 * _/_/_/ _ _/_/_/ _ _/_/_/ *

COMP: COMP: COMP: 85/05/09 * _/_/_/ _ _/_/_/ _ _/_/_/ *

HO COMMENT:

*
*

FG COMMENT:

*
*

COOP AGR # AMENDMENT # STATUS STATE #

*
*

REGION: 04
STATE : KY

U.S. ENVIRONMENTAL PROTECTION AGENCY
OFFICE OF EMERGENCY AND REMEDIAL RESPONSE
C E R C L A

PAGE: 140
RUN DATE: 05/08/27
RUN TIME: 11:09:36

3.2 - COMMENT MAINTENANCE FORM

SITE: MOBILE WASTE CONTROL OF KY LDPL

EPA ID: KY068347632

COM

NO. COMMENT

ACTION

001 PREVIOUS I.D. #'S KY0980501266, KYD

*

*

980557078.

*

*

002 PREVIOUS P.A.'S (NOT IN FILES) 80/0

*

*

1, 82/09, 82/10.

*

*

CHARLOTTE E. BALDWIN
SECRETARY



MARTHA LAYNE COLLINS
GOVERNOR

COMMONWEALTH OF KENTUCKY
NATURAL RESOURCES AND ENVIRONMENTAL PROTECTION CABINET
DEPARTMENT FOR ENVIRONMENTAL PROTECTION

FORT BOONE PLAZA
18 REILLY ROAD
FRANKFORT, KENTUCKY 40601

*Received
6/18/85
EPA*

MEMORANDUM

TO: Barry Burrus, Chief *BB*
Uncontrolled Site Section

THRU: Robert Prewitt, Environmental Program Coordinator *RHP*
Uncontrolled Site Section

FROM: Robert Burns, Environmentalist Senior *RB*
Uncontrolled Site Section

DATE: May 29, 1985

SUBJECT: Preliminary Assessment for the Mobile Waste Control of Kentucky
Landfill, Jefferson County
EPA I.D.# KYD980557078

The Mobile Waste Control of Kentucky Landfill, Mobil Waste Control, and SCA of Kentucky Fill are located on the same site area and are operated by the Waste Management Company. These sites should be considered aliases. This landfill is known to have accepted hazardous wastes, including hazardous liquids. Some of the wastes disposed at this landfill include waste oils, paint sludge, triphenyl phosphine, and hexachlorocyclopentadine.

The disposal area, as a whole, can be divided into an old area; located north of the Slop Ditch, and a new area, south of the Slop Ditch. The new area has a leachate collection system and groundwater monitoring wells; the old area has neither. The geology of the landfill is good for the containment of wastes and prevention of migration. The geology consists of 20 feet of clay over 30 feet of New Albany Shale.

Monitoring of the groundwater wells should indicate whether contamination is a problem with the new fill area, but as mentioned above, the old fill area has no groundwater monitoring wells.

After review of the KYNREPC files, conversations with field personnel and the completion of a preliminary assessment, it is recommended that this site be inspected on a medium priority. Responsible parties should be requested to install groundwater monitoring wells in the old fill area and conduct environmental samples to determine if this site does pose problems.

RB/tlj



POTENTIAL HAZARDOUS WASTE SITE
PRELIMINARY ASSESSMENT
PART 1 - SITE INFORMATION AND ASSESSMENT

I. IDENTIFICATION

01 STATE 02 SITE NUMBER
KY D980557072

II. SITE NAME AND LOCATION

| | | | | | |
|--|------------------------|--|-------------------------------|------------------------------|-------------------------------|
| 01 SITE NAME (Legal, common, or descriptive name of site) <i>Mobile Waste Control of Kentucky</i> | | 02 STREET, ROUTE NO., OR SPECIFIC LOCATION IDENTIFIER <i>2673 Outer Loop Road</i> | | | |
| 03 CITY <i>Louisville</i> | 04 STATE <i>Ky.</i> | 05 ZIP CODE <i>40219</i> | 06 COUNTY <i>Jefferson</i> | 07 COUNTY CODE <i>111</i> | 08 CONG DIST <i>03, 04</i> |
| 09 COORDINATES LATITUDE <i>38° 02' 30"</i> | | LONGITUDE <i>085° 43' 00"</i> | | | |

10 DIRECTIONS TO SITE (Starting from nearest public road)

Waterson Expressway West to Preston Street South. Turn left onto Trade Lane, go approximately four miles, site is on the left.

III. RESPONSIBLE PARTIES

| | | | | | |
|--|------------------------|---|--|--|--|
| 01 OWNER (If known) <i>Waste Management Company</i> | | 02 STREET (Business, mailing, residential) <i>2673 Outer Loop Road</i> | | | |
| 03 CITY <i>Louisville</i> | 04 STATE <i>Ky.</i> | 05 ZIP CODE <i>40219</i> | 06 TELEPHONE NUMBER <i>(502) 966-0272</i> | | |
| 07 OPERATOR (If known and different from owner) <i>Shirley Robinson</i> | | 08 STREET (Business, mailing, residential) <i>2673 Outer Loop Road</i> | | | |
| 09 CITY <i>Louisville</i> | 10 STATE <i>Ky.</i> | 11 ZIP CODE <i>40219</i> | 12 TELEPHONE NUMBER <i>(502) 966-0272</i> | | |

13 TYPE OF OWNERSHIP (Check one)

☒ A. PRIVATE ☐ B. FEDERAL: _____ (Agency name) ☐ C. STATE ☐ D. COUNTY ☐ E. MUNICIPAL
☐ F. OTHER: _____ (Specify) ☐ G. UNKNOWN

14 OWNER/OPERATOR NOTIFICATION ON FILE (Check all that apply)

☐ A. RCRA 3001 DATE RECEIVED: _____ MONTH DAY YEAR ☒ B. UNCONTROLLED WASTE SITE (CERCLA 103 c) DATE RECEIVED: _____ MONTH DAY YEAR ☐ C. NONE

IV. CHARACTERIZATION OF POTENTIAL HAZARD

| | | | | | |
|--|--|--|--|--|--|
| 01 ON SITE INSPECTION <input checked="" type="checkbox"/> YES DATE <i>3.7.85</i> MONTH DAY YEAR <input type="checkbox"/> NO | | BY (Check all that apply) <input type="checkbox"/> A. EPA <input type="checkbox"/> B. EPA CONTRACTOR <input checked="" type="checkbox"/> C. STATE <input type="checkbox"/> D. OTHER CONTRACTOR <input type="checkbox"/> E. LOCAL HEALTH OFFICIAL <input type="checkbox"/> F. OTHER: _____ (Specify) CONTRACTOR NAME(S): _____ | | | |
| 02 SITE STATUS (Check one) <input checked="" type="checkbox"/> A. ACTIVE <input type="checkbox"/> B. INACTIVE <input type="checkbox"/> C. UNKNOWN | | 03 YEARS OF OPERATION <i>1969</i> BEGINNING YEAR <i>_____</i> ENDING YEAR <input type="checkbox"/> UNKNOWN | | | |

04 DESCRIPTION OF SUBSTANCES POSSIBLY PRESENT, KNOWN, OR ALLEGED

This facility has had a history of accepting liquid hazardous wastes, waste oils, paint sludge, triphenyl phosphine, and hexachlorocyclopentadiene.

05 DESCRIPTION OF POTENTIAL HAZARD TO ENVIRONMENT AND/OR POPULATION

Potential for ground & surface water contamination, soil and air contamination.

V. PRIORITY ASSESSMENT

01 PRIORITY FOR INSPECTION (Check one. If high or medium is checked, complete Part 2 - Waste Information and Part 3 - Description of Hazardous Conditions and Incidents)

☐ A. HIGH (Inspection required promptly) ☒ B. MEDIUM (Inspection required) ☐ C. LOW (Inspect on time available basis) ☐ D. NONE (No further action needed, complete current disposition form)

VI. INFORMATION AVAILABLE FROM

| | | | | |
|--|---|--|--|--|
| 01 CONTACT <i>John Bamber</i> | 02 OF (Agency/Organization) <i>KYUREPC</i> | | 03 TELEPHONE NUMBER <i>(502) 588-4254</i> | |
| 04 PERSON RESPONSIBLE FOR ASSESSMENT <i>Robert Bamber</i> | 05 AGENCY <i>KYUREPC</i> | 06 ORGANIZATION <i>Waste Management</i> | 07 TELEPHONE NUMBER <i>(502) 564-6716</i> | 08 DATE <i>4.26.85</i> MONTH DAY YEAR |

| | |
|----|------------|
| KY | D990557078 |
|----|------------|



POTENTIAL HAZARDOUS WASTE SITE
PRELIMINARY ASSESSMENT

PART 3 - DESCRIPTION OF HAZARDOUS CONDITIONS AND INCIDENTS

I. IDENTIFICATION

01 STATE 02 SITE NUMBER
KY 0930557078

II. HAZARDOUS CONDITIONS AND INCIDENTS

01 ☒ A. GROUNDWATER CONTAMINATION

03 POPULATION POTENTIALLY AFFECTED: _____

02 ☐ OBSERVED (DATE: _____)

04 NARRATIVE DESCRIPTION

☒ POTENTIAL

☐ ALLEGED

01 ☒ B. SURFACE WATER CONTAMINATION

03 POPULATION POTENTIALLY AFFECTED: _____

02 ☐ OBSERVED (DATE: _____)

04 NARRATIVE DESCRIPTION

☒ POTENTIAL

☐ ALLEGED

01 ☒ C. CONTAMINATION OF AIR

03 POPULATION POTENTIALLY AFFECTED: _____

02 ☐ OBSERVED (DATE: _____)

04 NARRATIVE DESCRIPTION

☒ POTENTIAL

☐ ALLEGED

01 ☒ D. FIRE/EXPLOSIVE CONDITIONS

03 POPULATION POTENTIALLY AFFECTED: _____

02 ☐ OBSERVED (DATE: _____)

04 NARRATIVE DESCRIPTION

☒ POTENTIAL

☐ ALLEGED

01 ☒ E. DIRECT CONTACT

03 POPULATION POTENTIALLY AFFECTED: _____

02 ☐ OBSERVED (DATE: _____)

04 NARRATIVE DESCRIPTION

☒ POTENTIAL

☐ ALLEGED

01 ☒ F. CONTAMINATION OF SOIL

03 AREA POTENTIALLY AFFECTED: _____
(Acres)

02 ☐ OBSERVED (DATE: _____)

04 NARRATIVE DESCRIPTION

☒ POTENTIAL

☐ ALLEGED

01 ☐ G. DRINKING WATER CONTAMINATION

03 POPULATION POTENTIALLY AFFECTED: _____

02 ☐ OBSERVED (DATE: _____)

04 NARRATIVE DESCRIPTION

☐ POTENTIAL

☐ ALLEGED

01 ☒ H. WORKER EXPOSURE/INJURY

03 WORKERS POTENTIALLY AFFECTED: _____

02 ☐ OBSERVED (DATE: _____)

04 NARRATIVE DESCRIPTION

☒ POTENTIAL

☐ ALLEGED

01 ☒ I. POPULATION EXPOSURE/INJURY

03 POPULATION POTENTIALLY AFFECTED: _____

02 ☐ OBSERVED (DATE: _____)

04 NARRATIVE DESCRIPTION

☒ POTENTIAL

☐ ALLEGED



POTENTIAL HAZARDOUS WASTE SITE
PRELIMINARY ASSESSMENT

PART 3 - DESCRIPTION OF HAZARDOUS CONDITIONS AND INCIDENTS

I. IDENTIFICATION

01 STATE 02 SITE NUMBER

KY D980557078

II. HAZARDOUS CONDITIONS AND INCIDENTS (Continued)

01 ☐ J. DAMAGE TO FLORA
04 NARRATIVE DESCRIPTION

02 ☐ OBSERVED (DATE: _____)

☐ POTENTIAL

☐ ALLEGED

01 ☐ K. DAMAGE TO FAUNA
04 NARRATIVE DESCRIPTION (Include name(s) of species)

02 ☐ OBSERVED (DATE: _____)

☐ POTENTIAL

☐ ALLEGED

01 ☒ L. CONTAMINATION OF FOOD CHAIN
04 NARRATIVE DESCRIPTION

02 ☐ OBSERVED (DATE: _____)

☒ POTENTIAL

☐ ALLEGED

01 ☒ M. UNSTABLE CONTAINMENT OF WASTES
(Spills, runoff, standing liquids, leaking drums)
03 POPULATION POTENTIALLY AFFECTED: _____

02 ☐ OBSERVED (DATE: _____)

☒ POTENTIAL

☐ ALLEGED

04 NARRATIVE DESCRIPTION

01 ☒ N. DAMAGE TO OFFSITE PROPERTY
04 NARRATIVE DESCRIPTION

02 ☐ OBSERVED (DATE: _____)

☒ POTENTIAL

☐ ALLEGED

01 ☐ O. CONTAMINATION OF SEWERS, STORM DRAINS, WWTPs
04 NARRATIVE DESCRIPTION

02 ☐ OBSERVED (DATE: _____)

☐ POTENTIAL

☐ ALLEGED

01 ☒ P. ILLEGAL/UNAUTHORIZED DUMPING
04 NARRATIVE DESCRIPTION

02 ☐ OBSERVED (DATE: _____)

☒ POTENTIAL

☐ ALLEGED

05 DESCRIPTION OF ANY OTHER KNOWN, POTENTIAL, OR ALLEGED HAZARDS

III. TOTAL POPULATION POTENTIALLY AFFECTED: _____

IV. COMMENTS

This original site is being converted into a new area and old area. The new area has both a leachate collection system and groundwater monitoring wells. The old area has neither.

V. SOURCES OF INFORMATION (Cite specific references, e.g., state files, sample analysis, reports)

None found

CHARLOTTE E. BALDWIN
SECRETARY



MARTHA LAYNE COLLINS
GOVERNOR

COMMONWEALTH OF KENTUCKY
NATURAL RESOURCES AND ENVIRONMENTAL PROTECTION CABINET
DEPARTMENT FOR ENVIRONMENTAL PROTECTION

FORT BOONE PLAZA
18 REILLY ROAD
FRANKFORT, KENTUCKY 40601

MEMORANDUM

TO: Barry Burrus, Chief
Uncontrolled Site Section

THRU: Robert Prewitt, Environmental Program Coordinator
Uncontrolled Site Section

FROM: Robert Burns, Environmentalist Senior *RB*
Uncontrolled Site Section

DATE: May 29, 1985

SUBJECT: Preliminary Assessment for the Mobile Waste Control of Kentucky
Landfill, Jefferson County
EPA I.D.# KYD980557078

The Mobile Waste Control of Kentucky Landfill, Mobil Waste Control, and SCA of Kentucky Fill are located on the same site area and are operated by the Waste Management Company. These sites should be considered aliases. This landfill is known to have accepted hazardous wastes, including hazardous liquids. Some of the wastes disposed at this landfill include waste oils, paint sludge, triphenyl phosphine, and hexachlorocyclopentadine.

The disposal area, as a whole, can be divided into an old area; located north of the Slop Ditch, and a new area, south of the Slop Ditch. The new area has a leachate collection system and groundwater monitoring wells; the old area has neither. The geology of the landfill is good for the containment of wastes and prevention of migration. The geology consists of 20 feet of clay over 30 feet of New Albany Shale.

Monitoring of the groundwater wells should indicate whether contamination is a problem with the new fill area, but as mentioned above, the old fill area has no groundwater monitoring wells.

After review of the KYNREPC files, conversations with field personnel and the completion of a preliminary assessment, it is recommended that this site be inspected on a medium priority. Responsible parties should be requested to install groundwater monitoring wells in the old fill area and conduct environmental samples to determine if this site does pose problems.

RB/tlj



POTENTIAL HAZARDOUS WASTE SITE
PRELIMINARY ASSESSMENT
PART 1 - SITE INFORMATION AND ASSESSMENT

I. IDENTIFICATION

01 STATE 02 SITE NUMBER

KY 0980501266

II. SITE NAME AND LOCATION

| | | | | | |
|---|----------|---|-----------|----------------|--------------|
| 01 SITE NAME (Legal, common, or descriptive name of site) | | 02 STREET, ROUTE NO., OR SPECIFIC LOCATION IDENTIFIER | | | |
| Mobile Waste Control | | 2673 Outer Loop Road | | | |
| 03 CITY | 04 STATE | 05 ZIP CODE | 06 COUNTY | 07 COUNTY CODE | 08 CONG DIST |
| Louisville | Ky | 40219 | Jefferson | 111 | 03,04 |
| 09 COORDINATES LATITUDE | | LONGITUDE | | | |
| 38° 08' 30" | | 085° 43' 00" | | | |

10 DIRECTIONS TO SITE (Starting from nearest public road)
Watterson Expressway West to Preston Street South. Turn left onto Grade Lane, go approximately four miles, site is on the left.

III. RESPONSIBLE PARTIES

| | | | |
|--|----------|--|---------------------|
| 01 OWNER (If known) | | 02 STREET (Business, mailing, residential) | |
| Waste Management Company | | 2673 Outer Loop Road | |
| 03 CITY | 04 STATE | 05 ZIP CODE | 06 TELEPHONE NUMBER |
| Louisville | Ky | 40219 | 502-966-0272 |
| 07 OPERATOR (If known and different from owner) | | 08 STREET (Business, mailing, residential) | |
| Shirley Robinson | | 2673 Outer Loop Road | |
| 09 CITY | 10 STATE | 11 ZIP CODE | 12 TELEPHONE NUMBER |
| Louisville | Ky | 40219 | 502-966-0272 |
| 13 TYPE OF OWNERSHIP (Check one) | | | |
| <input checked="" type="checkbox"/> A. PRIVATE <input type="checkbox"/> B. FEDERAL: _____ (Agency name) <input type="checkbox"/> C. STATE <input type="checkbox"/> D. COUNTY <input type="checkbox"/> E. MUNICIPAL | | | |
| <input type="checkbox"/> F. OTHER: _____ (Specify) <input type="checkbox"/> G. UNKNOWN | | | |

14 OWNER/OPERATOR NOTIFICATION ON FILE (Check all that apply)

☐ A. RCRA 3001 DATE RECEIVED: _____ MONTH DAY YEAR ☒ B. UNCONTROLLED WASTE SITE (CERCLA 103 c) DATE RECEIVED: _____ MONTH DAY YEAR ☐ C. NONE

IV. CHARACTERIZATION OF POTENTIAL HAZARD

| | | | |
|--|---|--|--|
| 01 ON SITE INSPECTION | | BY (Check all that apply) | |
| <input checked="" type="checkbox"/> YES DATE 3/7/85 | <input type="checkbox"/> A. EPA | <input type="checkbox"/> B. EPA CONTRACTOR | <input checked="" type="checkbox"/> C. STATE |
| <input type="checkbox"/> NO | <input type="checkbox"/> E. LOCAL HEALTH OFFICIAL | <input type="checkbox"/> F. OTHER: _____ (Specify) | <input type="checkbox"/> D. OTHER CONTRACTOR |
| CONTRACTOR NAME(S): _____ | | | |
| 02 SITE STATUS (Check one) | | 03 YEARS OF OPERATION | |
| <input checked="" type="checkbox"/> A. ACTIVE <input type="checkbox"/> B. INACTIVE <input type="checkbox"/> C. UNKNOWN | | 1969 BEGINNING YEAR _____ ENDING YEAR <input type="checkbox"/> UNKNOWN | |
| 04 DESCRIPTION OF SUBSTANCES POSSIBLY PRESENT, KNOWN, OR ALLEGED | | | |
| Mobile Waste Control, # KY 0980501266, and Mobile Waste Control of Kentucky # KY 0980557078 should be considered aliases. See the PA for Mobile Waste Control of Kentucky. | | | |
| 05 DESCRIPTION OF POTENTIAL HAZARD TO ENVIRONMENT AND/OR POPULATION | | | |
| Control of Kentucky. | | | |

V. PRIORITY ASSESSMENT

01 PRIORITY FOR INSPECTION (Check one. If high or medium is checked, complete Part 2 - Waste Information and Part 3 - Description of Hazardous Conditions and Incidents)

☐ A. HIGH (Inspection required promptly) ☒ B. MEDIUM (Inspection required) ☐ C. LOW (Inspect on time available basis) ☐ D. NONE (No further action needed, complete current disposition form)

VI. INFORMATION AVAILABLE FROM

| | | | | |
|--------------------------------------|-----------------------------|-----------------|---------------------|------------------------|
| 01 CONTACT | 02 OF (Agency/Organization) | | 03 TELEPHONE NUMBER | |
| John Brooks | KYNREPC | | 502-588-4254 | |
| 04 PERSON RESPONSIBLE FOR ASSESSMENT | 05 AGENCY | 06 ORGANIZATION | 07 TELEPHONE NUMBER | 08 DATE |
| Robert Burns | KYNREPC | Waste Manage. | 502-564-6716 | 4/26/85 MONTH DAY YEAR |



| | |
|----------|----------------|
| 01 STATE | 02 SITE NUMBER |
|----------|----------------|

01 PHYSICAL STATES (Check all that apply)

- 02 WASTE QUANTITY AT SITE**
(Measures of waste quantities must be independent)

TONS _____

CUBIC YARDS _____

NO. OF DRUMS _____

03 WASTE CHARACTERISTICS (Check all that apply)

- [illegible]

| CATEGORY | SUBSTANCE NAME | 01 GROSS AMOUNT | 02 UNIT OF MEASURE | 03 COMMENTS |
|----------|-------------------------|-----------------|--------------------|-------------|
| SLU | SLUDGE | | | |
| OLW | OILY WASTE | | | |
| SOL | SOLVENTS | | | |
| PSD | PESTICIDES | | | |
| OCC | OTHER ORGANIC CHEMICALS | | | |
| IOC | INORGANIC CHEMICALS | | | |
| ACD | ACIDS | | | |
| BAS | BASES | | | |
| MES | HEAVY METALS | | | |

IV. HAZARDOUS SUBSTANCES (See Appendix for most frequently cited CAS Numbers)

[illegible]

V. FEEDSTOCKS (See Appendix for CAS Numbers)

| CATEGORY | 01 FEEDSTOCK NAME | 02 CAS NUMBER | CATEGORY | 01 FEEDSTOCK NAME | 02 CAS NUMBER |
|----------|-------------------|---------------|----------|-------------------|---------------|
| FDS | | | FDS | | |
| FDS | | | FDS | | |
| FDS | | | FDS | | |
| FDS | | | FDS | | |

VI. SOURCES OF INFORMATION (Cite specific references, e.g., state files, sample analysis, reports)



POTENTIAL HAZARDOUS WASTE SITE
PRELIMINARY ASSESSMENT

PART 3 - DESCRIPTION OF HAZARDOUS CONDITIONS AND INCIDENTS

I. IDENTIFICATION

01 STATE 02 SITE NUMBER

II. HAZARDOUS CONDITIONS AND INCIDENTS

01 ☐ A. GROUNDWATER CONTAMINATION: 02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED
03 POPULATION POTENTIALLY AFFECTED: _____ 04 NARRATIVE DESCRIPTION

01 ☐ B. SURFACE WATER CONTAMINATION: 02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED
03 POPULATION POTENTIALLY AFFECTED: _____ 04 NARRATIVE DESCRIPTION

01 ☐ C. CONTAMINATION OF AIR: 02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED
03 POPULATION POTENTIALLY AFFECTED: _____ 04 NARRATIVE DESCRIPTION

01 ☐ D. FIRE/EXPLOSIVE CONDITIONS: 02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED
03 POPULATION POTENTIALLY AFFECTED: _____ 04 NARRATIVE DESCRIPTION

01 ☐ E. DIRECT CONTACT: 02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED
03 POPULATION POTENTIALLY AFFECTED: _____ 04 NARRATIVE DESCRIPTION

01 ☐ F. CONTAMINATION OF SOIL: 02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED
03 AREA POTENTIALLY AFFECTED: _____ (Acres) 04 NARRATIVE DESCRIPTION

01 ☐ G. DRINKING WATER CONTAMINATION: 02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED
03 POPULATION POTENTIALLY AFFECTED: _____ 04 NARRATIVE DESCRIPTION

01 ☐ H. WORKER EXPOSURE/INJURY: 02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED
03 WORKERS POTENTIALLY AFFECTED: _____ 04 NARRATIVE DESCRIPTION

01 ☐ I. POPULATION EXPOSURE/INJURY: 02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED
03 POPULATION POTENTIALLY AFFECTED: _____ 04 NARRATIVE DESCRIPTION



POTENTIAL HAZARDOUS WASTE SITE
PRELIMINARY ASSESSMENT

PART 3 - DESCRIPTION OF HAZARDOUS CONDITIONS AND INCIDENTS

I. IDENTIFICATION

01 STATE 02 SITE NUMBER

II. HAZARDOUS CONDITIONS AND INCIDENTS (Continued)

01 ☐ J. DAMAGE TO FLORA
04 NARRATIVE DESCRIPTION

02 ☐ OBSERVED (DATE: _____)

☐ POTENTIAL

☐ ALLEGED

01 ☐ K. DAMAGE TO FAUNA
04 NARRATIVE DESCRIPTION (include name(s) of species)

02 ☐ OBSERVED (DATE: _____)

☐ POTENTIAL

☐ ALLEGED

01 ☐ L. CONTAMINATION OF FOOD CHAIN
04 NARRATIVE DESCRIPTION

02 ☐ OBSERVED (DATE: _____)

☐ POTENTIAL

☐ ALLEGED

01 ☐ M. UNSTABLE CONTAINMENT OF WASTES
(Spills/runoff/standing liquids/leaking drums)

03 POPULATION POTENTIALLY AFFECTED: _____

02 ☐ OBSERVED (DATE: _____)

04 NARRATIVE DESCRIPTION

☐ POTENTIAL

☐ ALLEGED

01 ☐ N. DAMAGE TO OFFSITE PROPERTY
04 NARRATIVE DESCRIPTION

02 ☐ OBSERVED (DATE: _____)

☐ POTENTIAL

☐ ALLEGED

01 ☐ O. CONTAMINATION OF SEWERS, STORM DRAINS, WWTPs
04 NARRATIVE DESCRIPTION

02 ☐ OBSERVED (DATE: _____)

☐ POTENTIAL

☐ ALLEGED

01 ☐ P. ILLEGAL/UNAUTHORIZED DUMPING
04 NARRATIVE DESCRIPTION

02 ☐ OBSERVED (DATE: _____)

☐ POTENTIAL

☐ ALLEGED

05 DESCRIPTION OF ANY OTHER KNOWN, POTENTIAL, OR ALLEGED HAZARDS

III. TOTAL POPULATION POTENTIALLY AFFECTED: _____

IV. COMMENTS

V. SOURCES OF INFORMATION (Cite specific references, e. g., state files, sample analysis, reports)

CHARLOTTE E. BALDWIN
SECRETARY



MARTHA LAYNE COLLINS
GOVERNOR

COMMONWEALTH OF KENTUCKY
NATURAL RESOURCES AND ENVIRONMENTAL PROTECTION CABINET
DEPARTMENT FOR ENVIRONMENTAL PROTECTION

FORT BOONE PLAZA
18 REILLY ROAD
FRANKFORT, KENTUCKY 40601

MEMORANDUM

TO: Barry Burrus, Chief
Uncontrolled Site Section

THRU: Robert Prewitt, Environmental Program Coordinator
Uncontrolled Site Section

FROM: Robert Burns, Environmentalist Senior *RB*
Uncontrolled Site Section

DATE: May 29, 1985

SUBJECT: Preliminary Assessment for the Mobile Waste Control of Kentucky
Landfill, Jefferson County
EPA I.D.# KYD980557078

The Mobile Waste Control of Kentucky Landfill, Mobil Waste Control, and SCA of Kentucky Fill are located on the same site area and are operated by the Waste Management Company. These sites should be considered aliases. This landfill is known to have accepted hazardous wastes, including hazardous liquids. Some of the wastes disposed at this landfill include waste oils, paint sludge, triphenyl phosphine, and hexachlorocyclopentadine.

The disposal area, as a whole, can be divided into an old area; located north of the Slop Ditch, and a new area, south of the Slop Ditch. The new area has a leachate collection system and groundwater monitoring wells; the old area has neither. The geology of the landfill is good for the containment of wastes and prevention of migration. The geology consists of 20 feet of clay over 30 feet of New Albany Shale.

Monitoring of the groundwater wells should indicate whether contamination is a problem with the new fill area, but as mentioned above, the old fill area has no groundwater monitoring wells.

After review of the KYNREPC files, conversations with field personnel and the completion of a preliminary assessment, it is recommended that this site be inspected on a medium priority. Responsible parties should be requested to install groundwater monitoring wells in the old fill area and conduct environmental samples to determine if this site does pose problems.

RB/tlj



POTENTIAL HAZARDOUS WASTE SITE
PRELIMINARY ASSESSMENT
PART 1 - SITE INFORMATION AND ASSESSMENT

I. IDENTIFICATION

01 STATE 02 SITE NUMBER

KY D068347632

II. SITE NAME AND LOCATION

01 SITE NAME (Legal, common, or descriptive name of site)

SCR of Kentucky

02 STREET, ROUTE NO., OR SPECIFIC LOCATION IDENTIFIER

2673 Outer Loop Road

03 CITY

Louisville

04 STATE

05 ZIP CODE

06 COUNTY

07 COUNTY CODE

08 CONG DIST

Ky.

40219

Jefferson

111

0324

09 COORDINATES LATITUDE

38°28'30"

LONGITUDE

085°43'00"

10 DIRECTIONS TO SITE (Starting from nearest public road)

Waterson Expressway West to Preston Street South, turn left onto Grade Lane, go approximately four miles, site is on the left.

III. RESPONSIBLE PARTIES

01 OWNER (If known)

Waste Management Company

02 STREET (Business, mailing, residential)

2673 Outer Loop Road

03 CITY

Louisville

04 STATE

05 ZIP CODE

06 TELEPHONE NUMBER

Ky.

40219

502'966-0272

07 OPERATOR (If known and different from owner)

Shirley Robinson

08 STREET (Business, mailing, residential)

2673 Outer Loop Road

09 CITY

Louisville

10 STATE

11 ZIP CODE

12 TELEPHONE NUMBER

Ky.

40219

502'966-0272

13 TYPE OF OWNERSHIP (Check one)

- ☒ A. PRIVATE ☐ B. FEDERAL: _____ (Agency name) ☐ C. STATE ☐ D. COUNTY ☐ E. MUNICIPAL
☐ F. OTHER: _____ (Specify) ☐ G. UNKNOWN

14 OWNER/OPERATOR NOTIFICATION ON FILE (Check all that apply)

- ☐ A. RCRA 3001 DATE RECEIVED: _____ MONTH DAY YEAR ☒ B. UNCONTROLLED WASTE SITE (CERCLA 103 c) DATE RECEIVED: _____ MONTH DAY YEAR ☐ C. NONE

IV. CHARACTERIZATION OF POTENTIAL HAZARD

01 ON SITE INSPECTION

☒ YES DATE 3/7/85
☐ NO MONTH DAY YEAR

BY (Check all that apply)

- ☐ A. EPA ☐ B. EPA CONTRACTOR ☒ C. STATE ☐ D. OTHER CONTRACTOR
☐ E. LOCAL HEALTH OFFICIAL ☐ F. OTHER: _____ (Specify)

CONTRACTOR NAME(S): _____

02 SITE STATUS (Check one)

- ☒ A. ACTIVE ☐ B. INACTIVE ☐ C. UNKNOWN

03 YEARS OF OPERATION

1969

BEGINNING YEAR

ENDING YEAR

☐ UNKNOWN

04 DESCRIPTION OF SUBSTANCES POSSIBLY PRESENT, KNOWN, OR ALLEGED

SCA of Kentucky, # KYD068347632, and Mobile Waste Control of Kentucky, # KYD980557078 should be considered aliases. See the PA for Mobile Waste Control of Kentucky.

05 DESCRIPTION OF POTENTIAL HAZARD TO ENVIRONMENT AND/OR POPULATION

V. PRIORITY ASSESSMENT

01 PRIORITY FOR INSPECTION (Check one. If high or medium is checked, complete Part 2 - Waste Information and Part 3 - Description of Hazardous Conditions and Incidents)

- ☐ A. HIGH (Inspection required promptly) ☒ B. MEDIUM (Inspection required) ☐ C. LOW (Inspect on time available basis) ☐ D. NONE (No further action needed, complete current disposition form)

VI. INFORMATION AVAILABLE FROM

01 CONTACT

John Brooks

02 OF (Agency/Organization)

KYNREPC

03 TELEPHONE NUMBER

502'588-4254

04 PERSON RESPONSIBLE FOR ASSESSMENT

Robert Burns

05 AGENCY

KYNREPC

06 ORGANIZATION

Waste Management

07 TELEPHONE NUMBER

502'564-6716

08 DATE

4/26/85
MONTH DAY YEAR



POTENTIAL HAZARDOUS WASTE SITE
PRELIMINARY ASSESSMENT
PART 3 - DESCRIPTION OF HAZARDOUS CONDITIONS AND INCIDENTS

I. IDENTIFICATION
01 STATE 02 SITE NUMBER

II. HAZARDOUS CONDITIONS AND INCIDENTS

01 ☐ A. GROUNDWATER CONTAMINATION 02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED
03 POPULATION POTENTIALLY AFFECTED: _____ 04 NARRATIVE DESCRIPTION

01 ☐ B. SURFACE WATER CONTAMINATION 02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED
03 POPULATION POTENTIALLY AFFECTED: _____ 04 NARRATIVE DESCRIPTION

01 ☐ C. CONTAMINATION OF AIR 02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED
03 POPULATION POTENTIALLY AFFECTED: _____ 04 NARRATIVE DESCRIPTION

01 ☐ D. FIRE/EXPLOSIVE CONDITIONS 02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED
03 POPULATION POTENTIALLY AFFECTED: _____ 04 NARRATIVE DESCRIPTION

01 ☐ E. DIRECT CONTACT 02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED
03 POPULATION POTENTIALLY AFFECTED: _____ 04 NARRATIVE DESCRIPTION

01 ☐ F. CONTAMINATION OF SOIL 02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED
03 AREA POTENTIALLY AFFECTED: _____ (Acres) 04 NARRATIVE DESCRIPTION

01 ☐ G. DRINKING WATER CONTAMINATION 02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED
03 POPULATION POTENTIALLY AFFECTED: _____ 04 NARRATIVE DESCRIPTION

01 ☐ H. WORKER EXPOSURE/INJURY 02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED
03 WORKERS POTENTIALLY AFFECTED: _____ 04 NARRATIVE DESCRIPTION

01 ☐ I. POPULATION EXPOSURE/INJURY 02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED
03 POPULATION POTENTIALLY AFFECTED: _____ 04 NARRATIVE DESCRIPTION



POTENTIAL HAZARDOUS WASTE SITE
PRELIMINARY ASSESSMENT

PART 3 - DESCRIPTION OF HAZARDOUS CONDITIONS AND INCIDENTS

I. IDENTIFICATION

01 STATE 02 SITE NUMBER

II. HAZARDOUS CONDITIONS AND INCIDENTS (Continued)

01 ☐ J. DAMAGE TO FLORA
04 NARRATIVE DESCRIPTION

02 ☐ OBSERVED (DATE: _____)

☐ POTENTIAL

☐ ALLEGED

01 ☐ K. DAMAGE TO FAUNA
04 NARRATIVE DESCRIPTION (include name(s) of species)

02 ☐ OBSERVED (DATE: _____)

☐ POTENTIAL

☐ ALLEGED

01 ☐ L. CONTAMINATION OF FOOD CHAIN
04 NARRATIVE DESCRIPTION

02 ☐ OBSERVED (DATE: _____)

☐ POTENTIAL

☐ ALLEGED

01 ☐ M. UNSTABLE CONTAINMENT OF WASTES
(Spills/runoff/standing liquids/leaking drums)
03 POPULATION POTENTIALLY AFFECTED: _____

02 ☐ OBSERVED (DATE: _____)

☐ POTENTIAL

☐ ALLEGED

04 NARRATIVE DESCRIPTION

01 ☐ N. DAMAGE TO OFFSITE PROPERTY
04 NARRATIVE DESCRIPTION

02 ☐ OBSERVED (DATE: _____)

☐ POTENTIAL

☐ ALLEGED

01 ☐ O. CONTAMINATION OF SEWERS, STORM DRAINS, WWTPs
04 NARRATIVE DESCRIPTION

02 ☐ OBSERVED (DATE: _____)

☐ POTENTIAL

☐ ALLEGED

01 ☐ P. ILLEGAL/UNAUTHORIZED DUMPING
04 NARRATIVE DESCRIPTION

02 ☐ OBSERVED (DATE: _____)

☐ POTENTIAL

☐ ALLEGED

05 DESCRIPTION OF ANY OTHER KNOWN, POTENTIAL, OR ALLEGED HAZARDS

III. TOTAL POPULATION POTENTIALLY AFFECTED: _____

IV. COMMENTS

V. SOURCES OF INFORMATION (Cite specific references, e. g., state files, sample analysis, reports)

United States
Environmental Protection
Agency
Washington DC 20460

Please type or print in ink. If you need additional space, use separate sheets of paper. Indicate the letter of the item which applies.

KY5000001105

2. *was*

Street

City

Stucco

Z. D. Cao et al.

Name of Site

Street

5.14

State

2.0 Conclusions

Name (Last, First and Title)

Fluorene

from (Yr 3):

[illegible]

00240

Notification of Hazardous Waste Site

Side Two

| | | |
|---|--|------------------------------------|
| F Waste Quantity | Facility Type | Total Facility Waste Amount |
| Place an X in the appropriate boxes to indicate the facility types found at the site. | 1 <input type="checkbox"/> Piles | cubic feet <u>7.4</u> |
| In the "total facility waste amount" space give the estimated combined quantity (volume) of hazardous wastes at the site using cubic feet or gallons. | 2 <input type="checkbox"/> Land Treatment | gallons _____ |
| In the "total facility area" space, give the estimated area size which the facilities occupy using square feet or acres. | 3 <input checked="" type="checkbox"/> Landfill | Total Facility Area |
| | 4 <input type="checkbox"/> Tanks | square feet _____ |
| | 5 <input type="checkbox"/> Impoundment | acres _____ |
| | 6 <input type="checkbox"/> Underground Injection | |
| | 7 <input type="checkbox"/> Drums, Above Ground | |
| | 8 <input type="checkbox"/> Drums, Below Ground | |
| | 9 <input type="checkbox"/> Other (Specify) _____ | |

G Known, Suspected or Likely Releases to the Environment:

Place an X in the appropriate boxes to indicate any known, suspected, or likely releases of wastes to the environment.

☐ Known ☐ Suspected ☐ Likely ☒ None

Note: Items H and I are optional. Completing these items will assist EPA and State and local governments in locating and assessing hazardous waste sites. Although completing the items is not required, you are encouraged to do so.

H Sketch Map of Site Location: (Optional)

Sketch a map showing streets, highways, routes or other prominent landmarks near the site. Place an X on the map to indicate the site location. Draw an arrow showing the direction north. You may substitute a publishing map showing the site location.

I Description of Site: (Optional)

Describe the history and present conditions of the site. Give directions to the site and describe any nearby wells, springs, lakes, or housing. Include such information as how waste was disposed and where the waste came from. Provide any other information or comments which may help describe the site conditions.

J Signature and Title:

The person or authorized representative (such as plant managers, superintendents, trustees or attorneys) of persons required to notify must sign the form and provide a mailing address (if different than address in item A). For other persons providing notification, the signature is optional. Check the boxes which best describe the relationship to the site of the person required to notify. If you are not required to notify check "Other".

Name LECIL M. COLBURN
 Street P.O. Box 22601
 City TAMPA State FL Zip Code 33622
 Signature Lecil M. Colburn Date 6/8/81

☐ Owner, Present
☐ Owner, Past
☐ Transporter
☐ Operator, Present
☐ Operator, Past
☒ Other

ROBERT D. BELL
SECRETARY



JULIAN M. CARROLL
GOVERNOR

COMMONWEALTH OF KENTUCKY
DEPARTMENT FOR NATURAL RESOURCES AND ENVIRONMENTAL PROTECTION
BUREAU OF ENVIRONMENTAL PROTECTION
~~XXXXXXXXXXXXXX~~
COMMISSIONER
FRANKFORT, KENTUCKY 40601

May 6, 1977

Mr. Emmitt L. Vanzant
Operations Manager
Mobile Waste Controls of Ky., Inc.
P. O. Box 21100
Louisville, Kentucky 40221

Dear Mr. Vanzant:

On March 29, 1977, the Metropolitan Sewer District disposed of grit chamber waste and sewage sludge which was contaminated with a hazardous waste at your landfill site #056.08. The Division of Solid Waste requested your company to mark the waste so that it could be removed, if necessary. Our review shows that this is extremely hazardous material and that we must request that it be removed and taken to an adequate disposal site.

Our understanding is that no definite decision has been made as to the method of disposal for the contaminated sludge still at the Morris Forman Plant of MSD. Assuming that an adequate site is located for the sludge still at MSD, the same site could also be used for the sludge retrieved from your landfill.

In checking our records neither MSD or Mobile Waste Control have been given permission to dispose of sludge or grit chamber waste at Mobile Waste Control. Therefore, any waste accepted from MSD will also have to be removed and taken to an approved disposal site for this waste.

The solid waste regulations require that "Liquids or hazardous substances shall not be discharged to or placed in a landfill unless written approval has been obtained from the department. Disposal of liquids may be permitted subject to special provisions which may vary from site to site." It is the policy of the Division of Solid Waste that any such waste disposed of without the special permission must be removed from the site.

Before any such waste is received, special permission must be granted in writing from the Division of Solid Waste. If you do not know what special permission has been granted, please feel free to contact us concerning this matter.

Sincerely,

Caroline Patrick Haight

Caroline Patrick Haight
Director, Field Program
Division of Solid Waste

CPH:mg

cc: Louisville Field Office

ROBERT D. BELL
SECRETARY



JULIAN M. CARROLL
GOVERNOR

COMMONWEALTH OF KENTUCKY
DEPARTMENT FOR NATURAL RESOURCES AND ENVIRONMENTAL PROTECTION
BUREAU OF ENVIRONMENTAL PROTECTION
JOHN A. ROTH
COMMISSIONER
FRANKFORT, KENTUCKY 40601

March 13, 1978

Mr. Emmitt L. Vanzant
Operations Manager
Mobile Waste Controls of Kentucky, Inc.
P.O. Box 21100
Louisville, Kentucky 40221

Dear Mr. Vanzant:

This is an introductory letter of sorts I will be working in the Louisville Area for the Division of Hazardous Materials and Waste Management beginning April 1, 1978.

Due to its site characteristics and reputation for good management, this agency sometimes recommends Mobile Waste Landfill to various concerns of Industrial Waste Disposal. However, the subject of this letter is not in that tradition. On Thursday, March 9, 1978, Steve Shannon and I were at the Mobile Waste site and observed the unauthorized deposition of approximately one thousand gallons of waste oil into the working face of your landfill site - by a tank-truck driver from Kentucky Petroleum Products Company. The present field representative of this division in the Louisville area disclosed the fact that he encountered a similar incident at Mobile Waste. The Administrative Regulations, based upon which Mobile Wastes permit was issued, prohibit the discharge of liquids into a landfill without special permission (KAR 2:010; Section 11(4)).

There are no special permissions issued by this Department for the disposal of waste oil in this manner. Waste oil may be recovered or incinerated. It is useful as a dust control measure during dry weather and I suggest that if you intend to accept waste oil under this auspice that a storage tank be placed on site for disposal during inappropriate weather conditions. Disposal in the manner we observed is both unlawful and un-necessary.

This office will also contact Kentucky Petroleum Products Company and advise them of the legal alternatives in waste oil disposal.

Emmitt L. Vanzant
Page 2
March 13, 1978

Despite this incident, I look forward to working in Louisville and hope for your cooperation and honesty. If I may be of assistance, call 564-6716.

Sincerely,

Robert L. Sholar

Robert L. Sholar
Environmental Specialist I
Hazardous Materials Management Section
Division of Hazardous Materials and
Waste Management

RLS:cjg

JEFF MOONEY
Secretary



JULIAN M. CARROLL
Governor

COMMONWEALTH OF KENTUCKY
DEPARTMENT FOR NATURAL RESOURCES AND ENVIRONMENTAL PROTECTION
BUREAU OF ENVIRONMENTAL PROTECTION
DIVISION OF HAZARDOUS MATERIAL AND WASTE MANAGEMENT
PINE HILL PLAZA
1121 LOUISVILLE ROAD
FRANKFORT, KENTUCKY 40601

October 27, 1980

file

Mobile Waste Controls of Kentucky, Inc.
P.O. Box 21101
Louisville, KY 40221

Dear Sir:

This letter is in response to an August 28, 1980, request from Ford Motor Company to dispose of Lagoon Sludge at your landfill, #056.08, in Jefferson County. We have evaluated the results of the leach test submitted by Environmental Consultants, Inc. The lagoon sludge which consists of at least 50 percent of paint sludge will be categorized as hazardous using the Federal Hazardous Waste Regulations (Federal Register, July 16, 1980, p. 47833). The waste is listed as F017, Based on EPA hazardous waste number.

You were previously notified by telephone that you had until October 16, 1980, the date on which Kentucky adopted the above Federal Hazardous Waste Regulations, to accept the waste. Hereafter, this waste will be treated as hazardous, and should be registered and disposed of in accordance with Kentucky's Hazardous Waste Regulations. Kentucky's present regulatory program does not permit the disposal of any hazardous waste at other than a permitted hazardous waste management facility. Further, Kentucky does not presently have a permitted hazardous waste landfill.

If you have any questions regarding this matter, please feel free to contact this office.

Sincerely,

Roger Blair
Roger Blair, Director
Division of Hazardous Material
and Waste Management

RB:GCS:akw

cc: Pat Haight
Ross Singleton
G. C. Shah
Ford Motor Company

M E M O R A N D U M

June 20, 1978

TO: JACK McCLURE, Chief
Hazardous Waste Management Section

FROM: ROBERT L. SHOLAR, Environmental Specialist RLS
Hazardous Waste Management Section

SUBJECT: Industrial Waste Disposal at Ford's Kentucky Truck Plant

FILE, FERN
RECEIVED
JUL 11 1978

On June 15, 1978, I met with Mr. Dave Madison, Environmental Engineer, at Ford Motor Company's Truck Plant. We discussed three waste by-products generated at this plant:

- 1) a process lagoon sludge,
- 2) a paint sludge,
- 3) and disposal of off-spec paint and solvents.

Item #1, the process lagoon sludge, is currently being treated and disposed of in Indiana by Industrial Liquid Waste Disposal. This is the same waste which the Division permitted for landfilling at Campground Landfill in 1974 as Chemfix material. According to Mr. Madison, Ford no longer utilizes this landfill and the permission may be withdrawn. Mr. Madison intends to analyze this sludge in case an emergency situation should ever require disposal in Kentucky.

Item #2, a paint sludge, is presently transported by lugar box to Mobile Waste Landfill for disposal. Mr. Madison agreed to analyze this sludge and apply for permission to dispose of the same.

Item #3, off-spec paint and solvent, is currently drummed and disposed of at Mobile Waste. Mr. Madison was informed that these materials are unacceptable for landfilling and he intends to contact local recyclers and scavengers as a possible solution to this problem.

Ford also recycles waste oil and their oil wastewater is hauled to Indiana by I.L.W.D.

RLS/lrw

Eugene F. Mooney
~~XXXXXXXXXX~~
SECRETARY



JULIAN M. CARROLL
GOVERNOR

COMMONWEALTH OF KENTUCKY
DEPARTMENT FOR NATURAL RESOURCES AND ENVIRONMENTAL PROTECTION
BUREAU OF ENVIRONMENTAL PROTECTION
JOHN A. ROTH
COMMISSIONER
FRANKFORT, KENTUCKY 40601

June 12, 1978

Mr. Emmitt L. Vanzant
Mobile Waste Controls of Kentucky, Inc.
P.O. Box 21101
Louisville, Kentucky 40221

Dear Mr. Vanzant:

This letter is to give you permission to accept 200 drums of paint sludge bottoms from Reliance Universal by way of the George W. Whitesides Company.

Permission is granted for these 200 drums only. The drums will be covered securely and should not be greater than $\frac{1}{2}$ full.

If you have any questions regarding this, please contact me.

Sincerely,

A handwritten signature in dark ink, appearing to read "C.P.H.", with a stylized flourish at the end.

Caroline Patrick Haight, Chief
Non-Hazardous Waste Management Section
Hazardous Material & Waste Management

CPH:RLS/lrw

cc: John Brooks
Bob Sholar
Ross Singleton
Jack McClure
George W. Whitesides
Joe Schneider

ROBERT D. BELL
SECRETARY



JULIAN M. CARROLL
GOVERNOR

COMMONWEALTH OF KENTUCKY
DEPARTMENT FOR NATURAL RESOURCES AND ENVIRONMENTAL PROTECTION
BUREAU OF ENVIRONMENTAL PROTECTION
JOHN A. ROTH
COMMISSIONER
FRANKFORT, KENTUCKY 40601

August 4, 1977

M & T Chemicals, Inc.
Carrollton Plant
Carrollton, Kentucky 41008

Dear Sirs:

This letter is in response to a request from Mobile Waste Controls of Ky., Inc. for your company to dispose of a sludge in their landfill site #056.08. You may consider this letter as permission to dispose of the 60% Latex Base Paint, 20% Oil Base Paint and 20% Sludge in the quantity of 120 yards per month.

This permission will be good for only one year from the date of this letter. At that time, we will again review the disposal request and make a decision as to further acceptance of the waste.

If you have any questions, please feel free to contact me.

Sincerely,

A handwritten signature in cursive script that reads "Caroline Patrick Haight".

Caroline Patrick Haight, Director
Non-Hazardous Waste Management Section

CPH:mg

cc: Mobile Waste Controls of Ky., Inc.
John Brooks
Ross Singleton

M E M O R A N D U M

January 18, 1977

RECEIVED

JAN 19 1977

TO: CAROLINE P. HAIGHT, Acting Director
Field Program
Division of Solid Waste

CPL

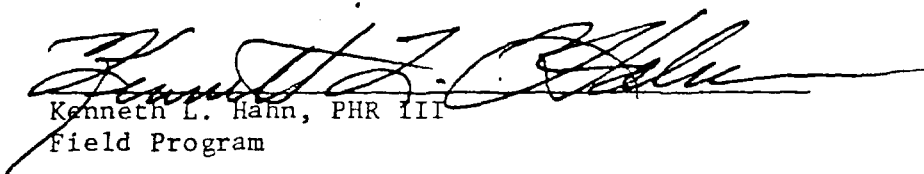
DIVISION OF SOLID WASTE
FRANKFORT, KENTUCKY 40601

FROM: KENNETH L. HAHN, PHR III
Field Program
Division of Solid Waste

SUBJECT: Mobile Waste Controls of Kentucky, Inc. (File #056.08)

Enclosed is the recent correspondence from Mobile Waste Controls of Kentucky, Inc. regarding waste being generated by the M & T Chemicals, Inc., of Carrollton, Kentucky. My files contain no written approval for this waste. A letter dated January 4, 1977, states that this waste is being accepted at the Mobile Waste Controls Landfill. Triphenyl phosphine according to Mr. Karl Patterson is a hazardous waste.

Therefore, consideration could be given to possible legal action in regard to the unauthorized acceptance of hazardous waste.


Kenneth L. Hahn, PHR III
Field Program

KLH/lrw

Enclosure

JOHN S. HOFFMAN
SECRETARY



JULIAN M. CARROLL
GOVERNOR

COMMONWEALTH OF KENTUCKY
DEPARTMENT FOR NATURAL RESOURCES AND ENVIRONMENTAL PROTECTION
BUREAU OF ENVIRONMENTAL QUALITY
HERMAN D. REGAN, JR.
COMMISSIONER
FRANKFORT, KENTUCKY 40601

July 10, 1975

Jf

Mr. Emmitt Vanzant, Operations Manager
Mobile Wastes Control of Kentucky, Inc.
P. O. Box 21101
Louisville, Kentucky 40221

Dear Mr. Vanzant:

As we discussed on July 9, 1975 by telephone, there is a leachate problem on the old section of your landfill on Grade Lane. Leachate was observed on the northern edge of your site parallel to Milton Avenue. Approximately twelve (12) leachate sources were observed in a distance of about thirty (30) feet on July 8.

At this time the leachate had very little flow rate, however, this does flow into a drainage ditch along the northern side. You would have to correct this matter at the earliest convenience. Please inform me by July 24 what measures you intend to take to correct this matter.

If I can be of any further assistance, please contact me.

Sincerely,

Kenneth Hahn

Kenneth Hahn, PHR III
Field Program, Division of Solid Waste

KH:mg

MEMORANDUM

July 1, 1975

TO: Samuel N. Johnson, Jr., P.E., Director *SNJ*
Division of Solid Waste

FROM: K. D. Kerr, P.E., Director *KDK*
Field Program, Division of Solid Waste

SUBJECT: Informal Hearing on Possible Closure of Mobile Waste
Control Sanitary Landfill #056.08

Attached is a copy of a memorandum from Kenneth Hahn, PHR III, in which it is recommended that division action be taken to force closure of the subject site.

A review of the inspection file record shows no satisfactory inspection report since their permit expired, i.e., no corrective action taken on unsatisfactory operating conditions since January 1, 1975.

Mr. Hahn's recommendation is concurred in, and it is hereby requested that an informal hearing date be set to provide the owners/operators with an opportunity to show cause why their operation should not be closed.

KDK:mg

cc: Kenneth Hahn

CHARLOTTE E. BALDWIN
SECRETARY



MARTHA LAYNE COLLINS
GOVERNOR

COMMONWEALTH OF KENTUCKY
NATURAL RESOURCES AND ENVIRONMENTAL PROTECTION CABINET
DEPARTMENT FOR ENVIRONMENTAL PROTECTION

FORT BOONE PLAZA
18 REILLY ROAD
FRANKFORT, KENTUCKY 40601

Received
4-9-85
EPA

MEMORANDUM

TO: Barry Burrus, Chief *BB*
Uncontrolled Site Section

FROM: Robert Burns, Environmentalist Sr. *RB*
Uncontrolled Site Section

DATE: May 2, 1985

RE: Preliminary Assessment for the Mobile Waste Control of Kentucky Landfill
Jefferson County
EPA I.D. #KYD980557078

The Mobile Waste Control of Kentucky Landfill, Mobile Waste Control Landfill, and SCA Fill are located on the same site area and are operated by the Waste Management Company. These sites should be considered aliases. This landfill is known to have accepted hazardous wastes including hazardous liquids. The area as a whole can be divided into an old area, located north of the Slop Ditch, and a new area, south of the Slop Ditch. The new area has a leachate collection system and groundwater monitoring wells; the old area has neither. The geology of the landfill is good for the containment of wastes and prevention of migration. The geology consists of 20 ft. of clay over 30 ft. of New Albany Shale.

Monitoring of the groundwater wells should indicate whether contamination is a problem with the new fill area, but as mentioned above, the old fill area has no groundwater monitoring wells.

After review of the KNREPC files, conversations with field personnel and the completion of a preliminary assessment, it is recommended that this site be inspected on a medium priority.

BB:akw

cc: File

*Jim German has
just taken
control of this site.
5-9-85*



POTENTIAL HAZARDOUS WASTE SITE
PRELIMINARY ASSESSMENT
PART 1 - SITE INFORMATION AND ASSESSMENT

I. IDENTIFICATION

01 STATE 02 SITE NUMBER
KY 0980557078

II. SITE NAME AND LOCATION

01 SITE NAME (Legal, common, or descriptive name of site)
Mobile Waste Control of Kentucky
02 STREET, ROUTE NO., OR SPECIFIC LOCATION IDENTIFIER
2673 Outer Loop Road
03 CITY
Louisville
04 STATE 05 ZIP CODE 06 COUNTY
Ky 40219 Jefferson
07 COUNTY CODE 08 CONG DIST
111 03,04
09 COORDINATES LATITUDE LONGITUDE
38°08'30" 085°43'00"

10 DIRECTIONS TO SITE (Starting from nearest public road)
Watterson Expressway West to Preston Street South. Turn left onto Brade Lane go approximately four miles. Site is on the left.

III. RESPONSIBLE PARTIES

01 OWNER (known)
Waste Management Company
02 STREET (Business, mailing, residential)
2673 Outer Loop Road
03 CITY
Louisville
04 STATE 05 ZIP CODE 06 TELEPHONE NUMBER
Ky 40219 (502) 966-0272
07 OPERATOR (if known and different from owner)
Shird Robinson
08 STREET (Business, mailing, residential)
2673 Outer Loop Road
09 CITY
Louisville
10 STATE 11 ZIP CODE 12 TELEPHONE NUMBER
Ky 40219 (502) 966-0272
13 TYPE OF OWNERSHIP (Check one)
☒ A. PRIVATE ☐ B. FEDERAL: (Agency name) ☐ C. STATE ☐ D. COUNTY ☐ E. MUNICIPAL
☐ F. OTHER: (Specify) ☐ G. UNKNOWN

14 OWNER-OPERATOR NOTIFICATION ON FILE (Check all that apply)
☐ A. RCRA 3001 DATE RECEIVED: MONTH DAY YEAR ☒ B. UNCONTROLLED WASTE SITE (RCRA 103 c) DATE RECEIVED: MONTH DAY YEAR ☐ C. NONE

IV. CHARACTERIZATION OF POTENTIAL HAZARD

01 ON SITE INSPECTION
☒ YES DATE 3.7.85 MONTH DAY YEAR
☐ NO
BY (Check all that apply)
☐ A. EPA ☐ B. EPA CONTRACTOR ☒ C. STATE ☐ D. OTHER CONTRACTOR
☐ E. LOCAL HEALTH OFFICIAL ☐ F. OTHER: (Specify)
CONTRACTOR NAME(S):

02 SITE STATUS (Check one)
☒ A. ACTIVE ☐ B. INACTIVE ☐ C. UNKNOWN
03 YEARS OF OPERATION
1969 BEGINNING YEAR ENDING YEAR ☐ UNKNOWN

04 DESCRIPTION OF SUBSTANCES POSSIBLY PRESENT, KNOWN, OR ALLEGED
This facility has had a history of accepting liquid hazardous waste, waste oils, paint sludge, and triphenyl phosphine, and hexachlorocyclopentadiene to name just a few. The geology of the area is good for a landfill (20 feet of clay soil, over 30 feet of

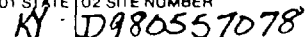
05 DESCRIPTION OF POTENTIAL HAZARD TO ENVIRONMENT AND/OR POPULATION
New Albany shale. The campground fill, Mobile Waste Control, SCA fill are all in the same area and all are operated by the Waste Management Company. The Mobile Waste Control, Mobile Waste Control of Ky, Campground fill, and SCA fill should be considered one site.

V. PRIORITY ASSESSMENT

01 PRIORITY FOR INSPECTION (Check one. If high or medium is checked, complete Part 2 - Waste Information and Part 3 - Description of Hazardous Conditions and Incidents)
☐ A. HIGH (Inspection required promptly) ☒ B. MEDIUM (Inspection required) ☐ C. LOW (Inspect on time available basis) ☐ D. NONE (No further action needed, complete current disposition form)

VI. INFORMATION AVAILABLE FROM

01 CONTACT
John Brooks
02 OF (Agency Organization)
KYNREPC
03 TELEPHONE NUMBER
(502) 588-4254
04 PERSON RESPONSIBLE FOR ASSESSMENT
Robert Burns
05 AGENCY
KYNREPC
06 ORGANIZATION
Waste Mgt.
07 TELEPHONE NUMBER
(502) 564-6716
08 DATE
4.26.85 MONTH DAY YEAR



| | | |
|--|---------------------------------------|--|
| <input checked="" type="checkbox"/> A TOXIC | <input type="checkbox"/> E SOLUBLE | <input type="checkbox"/> I HIGHLY VOLATILE |
| <input type="checkbox"/> B CORROSIVE | <input type="checkbox"/> F INFECTIOUS | <input type="checkbox"/> J EXPLOSIVE |
| <input type="checkbox"/> C RADIOACTIVE | <input type="checkbox"/> G FLAMMABLE | <input type="checkbox"/> K REACTIVE |
| <input checked="" type="checkbox"/> D PERSISTENT | <input type="checkbox"/> H IGNITABLE | <input type="checkbox"/> L INCOMPATIBLE |
| | | <input type="checkbox"/> M NOT APPLICABLE |



POTENTIAL HAZARDOUS WASTE SITE
PRELIMINARY ASSESSMENT
PART 3 - DESCRIPTION OF HAZARDOUS CONDITIONS AND INCIDENTS

I. IDENTIFICATION

01 STATE

02 SITE NUMBER

KY

D980557078

II. HAZARDOUS CONDITIONS AND INCIDENTS

01 ☐ A GROUNDWATER CONTAMINATION

02 ☐ OBSERVED (DATE: _____)

☐ POTENTIAL

☐ ALLEGED

03 POPULATION POTENTIALLY AFFECTED: _____

04 NARRATIVE DESCRIPTION

01 ☐ B SURFACE WATER CONTAMINATION

02 ☐ OBSERVED (DATE: _____)

☐ POTENTIAL

☐ ALLEGED

03 POPULATION POTENTIALLY AFFECTED: _____

04 NARRATIVE DESCRIPTION

01 ☐ C CONTAMINATION OF AIR

02 ☐ OBSERVED (DATE: _____)

☐ POTENTIAL

☐ ALLEGED

03 POPULATION POTENTIALLY AFFECTED: _____

04 NARRATIVE DESCRIPTION

Unknown

01 ☐ D FIRE/EXPLOSIVE CONDITIONS

02 ☐ OBSERVED (DATE: _____)

☐ POTENTIAL

☐ ALLEGED

03 POPULATION POTENTIALLY AFFECTED: _____

04 NARRATIVE DESCRIPTION

Unknown

01 ☐ E DIRECT CONTACT

02 ☐ OBSERVED (DATE: _____)

☐ POTENTIAL

☐ ALLEGED

03 POPULATION POTENTIALLY AFFECTED: _____

04 NARRATIVE DESCRIPTION

Unknown

01 ☐ F CONTAMINATION OF SOIL

02 ☐ OBSERVED (DATE: _____)

☐ POTENTIAL

☐ ALLEGED

03 AREA POTENTIALLY AFFECTED: _____
(Acres)

04 NARRATIVE DESCRIPTION

Unknown

01 ☐ G DRINKING WATER CONTAMINATION

02 ☐ OBSERVED (DATE: _____)

☐ POTENTIAL

☐ ALLEGED

03 POPULATION POTENTIALLY AFFECTED: _____

04 NARRATIVE DESCRIPTION

Unknown

01 ☐ H WORKER EXPOSURE/INJURY

02 ☐ OBSERVED (DATE: _____)

☐ POTENTIAL

☐ ALLEGED

03 WORKERS POTENTIALLY AFFECTED: _____

04 NARRATIVE DESCRIPTION

Unknown

01 ☐ I POPULATION EXPOSURE/INJURY

02 ☐ OBSERVED (DATE: _____)

☐ POTENTIAL

☐ ALLEGED

03 POPULATION POTENTIALLY AFFECTED: _____

04 NARRATIVE DESCRIPTION

Unknown



POTENTIAL HAZARDOUS WASTE SITE
PRELIMINARY ASSESSMENT

PART 3 - DESCRIPTION OF HAZARDOUS CONDITIONS AND INCIDENTS

I. IDENTIFICATION

01 STATE 02 SITE NUMBER
KY D980557078

II. HAZARDOUS CONDITIONS AND INCIDENTS (Continued)

01 ☐ J. DAMAGE TO FLORA
04 NARRATIVE DESCRIPTION

02 ☐ OBSERVED (DATE: _____)

☐ POTENTIAL

☐ ALLEGED

Unknown

01 ☐ K. DAMAGE TO FAUNA
04 NARRATIVE DESCRIPTION (include name(s) of species)

02 ☐ OBSERVED (DATE: _____)

☐ POTENTIAL

☐ ALLEGED

Unknown

01 ☐ L. CONTAMINATION OF FOOD CHAIN
04 NARRATIVE DESCRIPTION

02 ☐ OBSERVED (DATE: _____)

☐ POTENTIAL

☐ ALLEGED

Unknown

01 ☐ M. UNSTABLE CONTAINMENT OF WASTES
(Spills, runoff, standing liquids, leaking drums)

02 ☐ OBSERVED (DATE: _____)

☐ POTENTIAL

☐ ALLEGED

03 POPULATION POTENTIALLY AFFECTED: _____

04 NARRATIVE DESCRIPTION

Unknown

01 ☐ N. DAMAGE TO OFFSITE PROPERTY
04 NARRATIVE DESCRIPTION

02 ☐ OBSERVED (DATE: _____)

☐ POTENTIAL

☐ ALLEGED

Unknown

01 ☐ O. CONTAMINATION OF SEWERS, STORM DRAINS, WWTPs
04 NARRATIVE DESCRIPTION

02 ☐ OBSERVED (DATE: _____)

☐ POTENTIAL

☐ ALLEGED

Unknown

01 ☐ P. ILLEGAL/UNAUTHORIZED DUMPING
04 NARRATIVE DESCRIPTION

02 ☐ OBSERVED (DATE: _____)

☐ POTENTIAL

☐ ALLEGED

Unknown

05 DESCRIPTION OF ANY OTHER KNOWN, POTENTIAL, OR ALLEGED HAZARDS

Unknown

III. TOTAL POPULATION POTENTIALLY AFFECTED: _____

IV. COMMENTS

This disposal area can be divided into a new area and old area. The new area has both a leachate collection system and groundwater monitoring wells. The old area has neither.

V. SOURCES OF INFORMATION (Cite specific references, e.g., State files, sample analysis, reports)

KYDNREP files



POTENTIAL HAZARDOUS WASTE SITE
TENTATIVE DISPOSITION

REGION IV SITE NUMBER KYD980557078

File this form in the regional Hazardous Waste Log File and submit a copy to: U.S. Environmental Protection Agency, Site Tracking System, Hazardous Waste Enforcement Task Force (EN-335), 401 M St., SW, Washington, DC 20460.

I. SITE IDENTIFICATION

A. SITE NAME Mobile Waste Control of KY B. STREET 2673 Outer Loop Rd
C. CITY Louisville (Jefferson Co.) D. STATE KY E. ZIP CODE 40213

II. TENTATIVE DISPOSITION

Indicate the recommended action(s) and agency(ies) that should be involved by marking 'X' in the appropriate boxes.

| RECOMMENDATION | MARK 'X' | ACTION AGENCY | | | |
|---|----------|---------------|-------|-------|---------|
| | | EPA | STATE | LOCAL | PRIVATE |
| A. NO ACTION NEEDED -- NO HAZARD | | | | | |
| B. INVESTIGATIVE ACTION(S) NEEDED (If yes, complete Section III.) | X | | X | | |
| C. REMEDIAL ACTION NEEDED (If yes, complete Section IV.) | | | | | |
| D. ENFORCEMENT ACTION NEEDED (If yes, specify in Part E whether the case will be primarily managed by the EPA or the State and what type of enforcement action is anticipated.) | | | | | |

E. RATIONALE FOR DISPOSITION

Old Landfill contains waste oils, paint sludge, triphenyl phosphene, and hexachlorocyclopentadine.

Site has been reassigned to Jim Jarman.

F. INDICATE THE ESTIMATED DATE OF FINAL DISPOSITION (mo., day, & yr.)

G. IF A CASE DEVELOPMENT PLAN IS NECESSARY, INDICATE THE ESTIMATED DATE ON WHICH THE PLAN WILL BE DEVELOPED (mo., day, & yr.)

H. PREPARER INFORMATION

1. NAME Elizabeth M Shaver 2. TELEPHONE NUMBER (404) 881-2234 3. DATE (mo., day, & yr.) 6-18-85

III. INVESTIGATIVE ACTIVITY NEEDED

A. IDENTIFY ADDITIONAL INFORMATION NEEDED TO ACHIEVE A FINAL DISPOSITION.

State plans to do SI.

B. PROPOSED INVESTIGATIVE ACTIVITY (Detailed Information)

| 1. METHOD FOR OBTAINING NEEDED ADDITIONAL INFO. | 2. SCHEDULED DATE OF ACTION (mo., day, & yr.) | 3. TO BE PERFORMED BY (EPA, Contractor, State, etc.) | 4. ESTIMATED MANHOURS | 5. REMARKS |
|---|---|--|-----------------------|------------|
| a. TYPE OF SITE INSPECTION | | | | |
| (1) | | | | |
| (2) | | | | |
| (3) | | | | |
| b. TYPE OF MONITORING | | | | |
| (1) | | | | |
| (2) | | | | |
| c. TYPE OF SAMPLING | | | | |
| (1) | | | | |
| (2) | | | | |

III. INVESTIGATIVE ACTIVITY NEEDED and PART B - PROPOSED INVESTIGATIVE ACTIVITY (Continued)

| | | | | | |
|-------------------------|--|--|--|--|--|
| d. TYPE OF LAB ANALYSIS | | | | | |
| (1) | | | | | |
| (2) | | | | | |
| e. OTHER (specify) | | | | | |
| (1) | | | | | |
| (2) | | | | | |

ELABORATE ON ANY OF THE INFORMATION PROVIDED IN PART B (on front & above), AS NEEDED TO IDENTIFY ADDITIONAL INVESTIGATIVE WORK.

D. ESTIMATED MANHOURS BY ACTION AGENCY

| 1. ACTION AGENCY | 2. TOTAL ESTIMATED MANHOURS FOR INVESTIGATIVE ACTIVITIES | 1. ACTION AGENCY | 2. TOTAL ESTIMATED MANHOURS FOR INVESTIGATIVE ACTIVITIES |
|-------------------|--|--------------------|--|
| a. EPA | | b. STATE | |
| c. EPA CONTRACTOR | | d. OTHER (specify) | |

IV. REMEDIAL ACTIONS

A. SHORT TERM EMERGENCY STRATEGY (On Site & Off-Site) List all emergency actions needed to bring site under immediate control, e.g., restrict access, provide alternate water supply, etc. See instructions for a list of Key Words for each of the actions to be used in the space below.

| 1. ACTION | 2. EST. START DATE (mo, day, & yr) | 3. EST. END DATE (mo, day, & yr) | 4. ACTION AGENCY (EPA, State, Private Party) | 5. ESTIMATED COST | 6. SPECIFY 311 OR OTHER ACTION; INDICATE THE MAGNITUDE OF THE WORK REQUIRED |
|-----------|---------------------------------------|-------------------------------------|---|-------------------|---|
| | | | | \$ | |
| | | | | \$ | |
| | | | | \$ | |
| | | | | \$ | |
| | | | | \$ | |
| | | | | \$ | |

B. LONG TERM STRATEGY (On Site & Off-Site) List all long term solutions, e.g., excavation, removal, ground water monitoring wells, etc. See instructions for a list of Key Words for each of the actions to be used in the spaces below.

| 1. ACTION | 2. EST. START DATE (mo, day, & yr) | 3. EST. END DATE (mo, day, & yr) | 4. ACTION AGENCY (EPA, State, Private Party) | 5. ESTIMATED COST | 6. SPECIFY 311 OR OTHER ACTION; INDICATE THE MAGNITUDE OF THE WORK REQUIRED |
|-----------|---------------------------------------|-------------------------------------|---|-------------------|---|
| | | | | \$ | |
| | | | | \$ | |
| | | | | \$ | |
| | | | | \$ | |
| | | | | \$ | |
| | | | | \$ | |

C. ESTIMATED MANHOURS AND COST BY ACTION AGENCY

| 1. ACTION AGENCY | 2. TOTAL EST. MANHOURS FOR REMEDIAL ACTIVITIES | 3. TOTAL EST. COST FOR REMEDIAL ACTIVITIES | 1. ACTION AGENCY | 2. TOTAL EST. MANHOURS FOR REMEDIAL ACTIVITIES | 3. TOTAL EST. COST FOR REMEDIAL ACTIVITIES |
|--------------------|--|--|--------------------|--|--|
| a. EPA | | | b. STATE | | |
| c. PRIVATE PARTIES | | | d. OTHER (specify) | | |



POTENTIAL HAZARDOUS WASTE SITE
TENTATIVE DISPOSITION

REGION IV SITE NUMBER KYD980557078

File this form in the regional Hazardous Waste Log File and submit a copy to U.S. Environmental Protection Agency, Site Tracking System, Hazardous Waste Enforcement Task Force (EN-335), 401 M St., SW, Washington, DC 20460.

I. SITE IDENTIFICATION

A. SITE NAME Mobile Waste Control of KY Ldfl B. STREET 2673 Outer Loop Rd
C. CITY Louisville (Jefferson Co) D. STATE KY E. ZIP CODE 40219

II. TENTATIVE DISPOSITION

Indicate the recommended action(s) and agency(ies) that should be involved by marking 'X' in the appropriate boxes.

| RECOMMENDATION | MARK 'X' | ACTION AGENCY | | | |
|---|----------|---------------|-------|-------|---------|
| | | EPA | STATE | LOCAL | PRIVATE |
| A. NO ACTION NEEDED -- NO HAZARD | | | | | |
| B. INVESTIGATIVE ACTION(S) NEEDED (If yes, complete Section III.) | X | | X | | |
| C. REMEDIAL ACTION NEEDED (If yes, complete Section IV.) | | | | | |
| D. ENFORCEMENT ACTION NEEDED (If yes, specify in Part E whether the case will be primarily managed by the EPA or the State and what type of enforcement action is anticipated.) | | | | | |

E. RATIONALE FOR DISPOSITION

Jim Jarman told me on 5-9-85 that he would schedule a site inspection for this site.

F. INDICATE THE ESTIMATED DATE OF FINAL DISPOSITION (mo., day, & yr.)

G. IF A CASE DEVELOPMENT PLAN IS NECESSARY, INDICATE THE ESTIMATED DATE ON WHICH THE PLAN WILL BE DEVELOPED (mo., day, & yr.)

H. PREPARER INFORMATION

1. NAME Elizabeth Shaver 2. TELEPHONE NUMBER (904) 881-2239 3. DATE (mo., day, & yr.) 5-8-85

III. INVESTIGATIVE ACTIVITY NEEDED

A. IDENTIFY ADDITIONAL INFORMATION NEEDED TO ACHIEVE A FINAL DISPOSITION.

Waste type + quantity + degree of contamination
PA is very sketchy.

B. PROPOSED INVESTIGATIVE ACTIVITY (Detailed Information)

| 1. METHOD FOR OBTAINING NEEDED ADDITIONAL INFO. | 2. SCHEDULED DATE OF ACTION (mo., day, & yr.) | 3. TO BE PERFORMED BY (EPA, Contractor, State, etc.) | 4. ESTIMATED MANHOURS | 5. REMARKS |
|---|---|--|-----------------------|------------|
| a. TYPE OF SITE INSPECTION | | | | |
| (1) | | | | |
| (2) | | | | |
| (3) | | | | |
| b. TYPE OF MONITORING | | | | |
| (1) | | | | |
| (2) | | | | |
| c. TYPE OF SAMPLING | | | | |
| (1) | | | | |
| (2) | | | | |

III. INVESTIGATIVE ACTIVITY NEEDED and PART B. PROPOSED INVESTIGATIVE ACTIVITY (Continued)

| | | | | |
|-------------------------|--|--|--|--|
| d. TYPE OF LAB ANALYSIS | | | | |
| (1) | | | | |
| (2) | | | | |
| e. OTHER (specify) | | | | |
| (1) | | | | |
| (2) | | | | |

c. ELABORATE ON ANY OF THE INFORMATION PROVIDED IN PART B (on front & above), AS NEEDED TO IDENTIFY ADDITIONAL INVESTIGATIVE WORK.

D. ESTIMATED MANHOURS BY ACTION AGENCY

| 1. ACTION AGENCY | 2. TOTAL ESTIMATED MANHOURS FOR INVESTIGATIVE ACTIVITIES | 1. ACTION AGENCY | 2. TOTAL ESTIMATED MANHOURS FOR INVESTIGATIVE ACTIVITIES |
|-------------------|--|--------------------|--|
| a. EPA | | b. STATE | |
| c. EPA CONTRACTOR | | d. OTHER (specify) | |

IV. REMEDIAL ACTIONS

A. SHORT TERM EMERGENCY STRATEGY (On Site & Off-Site) List all emergency actions needed to bring site under immediate control, e.g., restrict access, provide alternate water supply, etc. See instructions for a list of Key Words for each of the actions to be used in the space below.

| 1. ACTION | 2. EST. START DATE (mo, day, & yr) | 3. EST. END DATE (mo, day, & yr) | 4. ACTION AGENCY (EPA, State, Private Party) | 5. ESTIMATED COST | 6. SPECIFY 311 OR OTHER ACTION; INDICATE THE MAGNITUDE OF THE WORK REQUIRED |
|-----------|---------------------------------------|-------------------------------------|---|-------------------|--|
| | | | | \$ | |
| | | | | \$ | |
| | | | | \$ | |
| | | | | \$ | |
| | | | | \$ | |
| | | | | \$ | |

B. LONG TERM STRATEGY (On Site & Off-Site) List all long term solutions, e.g., excavation, removal, ground water monitoring wells, etc. See instructions for a list of Key Words for each of the actions to be used in the spaces below.

| 1. ACTION | 2. EST. START DATE (mo, day, & yr) | 3. EST. END DATE (mo, day, & yr) | 4. ACTION AGENCY (EPA, State, Private Party) | 5. ESTIMATED COST | 6. SPECIFY 311 OR OTHER ACTION; INDICATE THE MAGNITUDE OF THE WORK REQUIRED |
|-----------|---------------------------------------|-------------------------------------|---|-------------------|--|
| | | | | \$ | |
| | | | | \$ | |
| | | | | \$ | |
| | | | | \$ | |
| | | | | \$ | |
| | | | | \$ | |

C. ESTIMATED MANHOURS AND COST BY ACTION AGENCY

| 1. ACTION AGENCY | 2. TOTAL EST. MANHOURS FOR REMEDIAL ACTIVITIES | 3. TOTAL EST. COST FOR REMEDIAL ACTIVITIES | 1. ACTION AGENCY | 2. TOTAL EST. MANHOURS FOR REMEDIAL ACTIVITIES | 3. TOTAL EST. COST FOR REMEDIAL ACTIVITIES |
|--------------------|--|--|--------------------|--|--|
| a. EPA | | | b. STATE | | |
| c. PRIVATE PARTIES | | | d. OTHER (specify) | | |



POTENTIAL HAZARDOUS WASTE SITE
IDENTIFICATION AND PRELIMINARY ASSESSMENT

REGION

SITE NUMBER (to be assigned by HQ)

NOTE: This form is completed for each potential hazardous waste site to help set priorities for site inspection. The information submitted on this form is based on available records and may be updated on subsequent forms as a result of additional inquiries and on-site inspections.

GENERAL INSTRUCTIONS: Complete Sections I and III through X as completely as possible before Section II (Preliminary Assessment). File this form in the Regional Hazardous Waste Log File and submit a copy to: U.S. Environmental Protection Agency (EPA-335); 401 M St., SW; Washington, DC 20460.

KY0008347632 JEFFERSON
SCA OF KENTUCKY
1901 DUTCH LOOP
LOUISVILLE
DURST, S.C.

KY 40221
5023660341

ON

(for other identifier)

E. ZIP CODE

F. COUNTY NAME

2. TELEPHONE NUMBER

H. TYPE OF OWNERSHIP

☐ 1. FEDERAL ☐ 2. STATE ☐ 3. COUNTY ☐ 4. MUNICIPAL ☒ 5. PRIVATE ☐ 6. UNKNOWN

I. 1

"103-C IDENTIFICATION" DATE: 8/10/89
CARL SCHROEDER
PHONE: 502-564-6716

K. DATE IDENTIFIED
(mo., day, & yr.)

L.

2. TELEPHONE NUMBER

II. PRELIMINARY ASSESSMENT (complete this section last)

A. APPARENT SERIOUSNESS OF PROBLEM

☐ 1. HIGH ☐ 2. MEDIUM ☐ 3. LOW ☒ 4. NONE ☐ 5. UNKNOWN

B. RECOMMENDATION

☒ 1. NO ACTION

☐ 2. SITE INSPECTION

b. WILL BE PERFORMED BY

☐ 2. IMMEDIATE SITE INSPECTION NEEDED
a. TENTATIVELY SCHEDULED FOR

b. WILL BE PERFORMED BY

☐ 4. SITE INSPECTION NEEDED (low priority)

C. PREPARER INFORMATION

1. NAME

2. TELEPHONE NUMBER

3. DATE (mo., day, & yr.)

III. SITE INFORMATION

A. SITE STATUS

☐ 1. ACTIVE (Those industrial or municipal sites which are being used for waste treatment, storage, or disposal on a continuing basis, even if infrequently.)

☐ 2. INACTIVE (Those sites which no longer receive wastes.)

☐ 3. OTHER (specify):
(Those sites that include such incidents like "midnight dumping" where no regular or continuing use of the site for waste disposal has occurred.)

B. IS GENERATOR ON SITE?

☐ 1. NO

☐ 2. YES (specify generator's four-digit SIC Code):

C. AREA OF SITE (in acres)

D. IF APPARENT SERIOUSNESS OF SITE IS HIGH, SPECIFY COORDINATES

1. LATITUDE (deg., min., sec.)

2. LONGITUDE (deg., min., sec.)

E. ARE THERE BUILDINGS ON THE SITE?

☐ 1. NO

☐ 2. YES (specify):

IV. CHARACTERIZATION OF SITE ACTIVITY

Indicate the major site activity(ies) and details relating to each activity by marking 'X' in the appropriate boxes.

| <input checked="" type="checkbox"/> A. TRANSPORTER | <input checked="" type="checkbox"/> B. STORER | <input checked="" type="checkbox"/> C. TREATER | <input checked="" type="checkbox"/> D. DISPOSER |
|--|---|--|---|
| 1. RAIL | 1. POND | 1. FILTRATION | 1. LANDFILL |
| 2. SHIP | 2. SURFACE IMPOUNDMENT | 2. INCINERATION | 2. LANDFARM |
| 3. BARGE | 3. DRUMS | 3. VOLUME REDUCTION | 3. OPEN DUMP |
| 4. TRUCK | 4. TANK ABOVE GROUND | 4. RECYCLING/RECOVERY | 4. SURFACE IMPOUNDMENT |
| 5. PIPELINE | 5. TANK, BELOW GROUND | 5. CHEM./PHYS. TREATMENT | 5. MIDDY DUMPING |
| 6. OTHER (specify): | 6. OTHER (specify): | 6. BIOLOGICAL TREATMENT | 6. INCINERATION |
| | | 7. WASTE OIL REPROCESSING | 7. UNDERGROUND INJECTION |
| | | 8. SOLVENT RECOVERY | 8. OTHER (specify): |
| | | 9. OTHER (specify): | |

E. SPECIFY DETAILS OF SITE ACTIVITIES AS NEEDED

V. WASTE RELATED INFORMATION

A. WASTE TYPE

☐ 1. UNKNOWN ☐ 2. LIQUID ☐ 3. SOLID ☐ 4. SLUDGE ☐ 5. GAS

B. WASTE CHARACTERISTICS

☐ 1. UNKNOWN ☐ 2. CORROSIVE ☐ 3. IGNITABLE ☐ 4. RADIOACTIVE ☐ 5. HIGHLY VOLATILE

☐ 6. TOXIC ☐ 7. REACTIVE ☐ 8. INERT ☐ 9. FLAMMABLE

☐ 10. OTHER (specify):

C. WASTE CATEGORIES

1. Are records of wastes available? Specify items such as manifests, inventories, etc. below.

2. Estimate the amount (specify unit of measure) of waste by category; mark 'X' to indicate which wastes are present.

| a. SLUDGE | b. OIL | c. SOLVENTS | d. CHEMICALS | e. SOLIDS | f. OTHER |
|--|--|---|---|---|---|
| AMOUNT | AMOUNT | AMOUNT | AMOUNT | AMOUNT | AMOUNT |
| UNIT OF MEASURE | UNIT OF MEASURE | UNIT OF MEASURE | UNIT OF MEASURE | UNIT OF MEASURE | UNIT OF MEASURE |
| <input checked="" type="checkbox"/> 1. PAINT, PIGMENTS | <input checked="" type="checkbox"/> 1. OILY WASTES | <input checked="" type="checkbox"/> 1. HALOGENATED SOLVENTS | <input checked="" type="checkbox"/> 1. ACIDS | <input checked="" type="checkbox"/> 1. LUNATH | <input checked="" type="checkbox"/> 1. LABORATORY PHARMACEUT. |
| <input type="checkbox"/> 2. METALS SLUDGES | <input type="checkbox"/> 2. OTHER (specify): | <input type="checkbox"/> 2. NON-HALOGENATED SOLVENTS | <input type="checkbox"/> 2. PICKLING LIQUORS | <input type="checkbox"/> 2. ASBESTOS | <input type="checkbox"/> 2. HOSPITAL |
| <input type="checkbox"/> 3. ROTW | | <input type="checkbox"/> 3. OTHER (specify): | <input type="checkbox"/> 3. EXPLOSIVES | <input type="checkbox"/> 3. COMBUSTIBLE MATERIALS | <input type="checkbox"/> 3. RADIOACTIVE |
| <input type="checkbox"/> 4. ALUMINUM SLUDGE | | | <input type="checkbox"/> 4. PESTICIDES | <input type="checkbox"/> 4. FERTILIZERS | <input type="checkbox"/> 4. MINERAL |
| <input type="checkbox"/> 5. OTHER (specify): | | | <input type="checkbox"/> 5. DYES/DINKS | <input type="checkbox"/> 5. OTHER (specify): | <input type="checkbox"/> 5. OTHER (specify): |
| | | | <input type="checkbox"/> 6. CYANIDE | | |
| | | | <input type="checkbox"/> 7. PHENOLS | | |
| | | | <input type="checkbox"/> 8. HALOGENS | | |
| | | | <input type="checkbox"/> 9. PCB | | |
| | | | <input type="checkbox"/> 10. OTHER (specify): | | |

V. WASTE RELATED INFORMATION (continued)

3. LIST SUBSTANCES OF GREATEST CONCERN WHICH MAY BE ON THE SITE (place in descending order of hazard).

4. ADDITIONAL COMMENTS OR NARRATIVE DESCRIPTION OF SITUATION WHICH OR REPORTED TO EXIST AT THE SITE.

VI. HAZARD DESCRIPTION

| A. TYPE OF HAZARD | B. POTENTIAL HAZARD (mark 'X') | C. ALLEGED INCIDENT (mark 'X') | D. DATE OF INCIDENT (mo., day, yr.) | E. REMARKS |
|--|--------------------------------|--------------------------------|-------------------------------------|------------|
| 1. NO HAZARD | | | | |
| 2. HUMAN HEALTH | | | | |
| 3. NON-WORKER INJURY/EXPOSURE | | | | |
| 4. WORKER INJURY | | | | |
| 5. CONTAMINATION OF WATER SUPPLY | | | | |
| 6. CONTAMINATION OF FOOD CHAIN | | | | |
| 7. CONTAMINATION OF GROUND WATER | | | | |
| 8. CONTAMINATION OF SURFACE WATER | | | | |
| 9. DAMAGE TO FLORA/FAUNA | | | | |
| 10. FISH KILL | | | | |
| 11. CONTAMINATION OF AIR | | | | |
| 12. NOTICEABLE ODORS | | | | |
| 13. CONTAMINATION OF SOIL | | | | |
| 14. PROPERTY DAMAGE | | | | |
| 15. FIRE OR EXPLOSION | | | | |
| 16. SPILLS/LEAKING CONTAINERS/ RUNOFF/STANDING LIQUIDS | | | | |
| 17. SEWER, STORM DRAIN PROBLEMS | | | | |
| 18. EROSION PROBLEMS | | | | |
| 19. INADEQUATE SECURITY | | | | |
| 20. INCOMPATIBLE WASTES | | | | |
| 21. MIDNIGHT DUMPING | | | | |
| 22. OTHER (specify) | | | | |

VII. PERMIT INFORMATION

A. INDICATE ALL APPLICABLE PERMITS HELD BY THE SITE.

- ☐ 1 NPDES PERMIT ☐ 2 SPCC PLAN ☐ 3 STATE PERMIT (specify) _____
☐ 4 AIR PERMITS ☐ 5 LOCAL PERMIT ☐ 6 RCRA TRANSPORTER
☐ 7 RCRA STORER ☐ 8 RCRA TREATER ☐ 9 RCRA DISPOSER
☐ 10. OTHER (specify) _____

B. IN COMPLIANCE?

- ☐ 1 YES ☐ 2 NO ☐ 3 UNKNOWN

4 WITH RESPECT TO (list regulation name & number): _____

VIII. PAST REGULATORY ACTIONS

- ☐ A. NONE ☐ B. YES (summarize below)

IX. INSPECTION ACTIVITY (past or on-going)

- ☐ A. NONE ☐ B. YES (complete items 1, 2, 3, & 4 below)

| 1. TYPE OF ACTIVITY | 2. DATE OF PAST ACTION (mo., day, & yr.) | 3. PERFORMED BY (EPA/State) | 4. DESCRIPTION |
|---------------------|--|-----------------------------|----------------|
| | | | |
| | | | |
| | | | |

X. REMEDIAL ACTIVITY (past or on-going)

- ☐ A. NONE ☐ B. YES (complete items 1, 2, 3, & 4 below)

| 1. TYPE OF ACTIVITY | 2. DATE OF PAST ACTION (mo., day, & yr.) | 3. PERFORMED BY (EPA/State) | 4. DESCRIPTION |
|---------------------|--|-----------------------------|----------------|
| | | | |
| | | | |
| | | | |

NOTE: Based on the information in Sections III through X, fill out the Preliminary Assessment (Section II) information on the first page of this form.



POTENTIAL HAZARDOUS WASTE SITE
IDENTIFICATION AND PRELIMINARY ASSESSMENT

REGION SITE NUMBER (to be assigned by HQ)

NOTE: This form is completed for each potential hazardous waste site to help set priorities for site inspection. The information submitted on this form is based on available records and may be updated on subsequent forms as a result of additional inquiries and on-site inspections.

GENERAL INSTRUCTIONS: Complete Sections I and III through X as completely as possible before Section II (Preliminary Assessment). File this form in the Regional Hazardous Waste Log File and submit a copy to: U.S. Environmental Protection Force (EN-335); 401 M St., SW; Washington, DC 20460.

KYD980557078 JEFFERSON
MOBILE WASTE CONTROLS OF KENTUCKY
1901 OUTER LOOP
LOUISVILLE

JUHASZ, PAUL J., DIR/MFG

SAME AS

OUTER LOOP LANDFILL

KY 40219

LOCATION

STREET (or other identifier)

DATE E. ZIP CODE

F. COUNTY NAME

2. TELEPHONE NUMBER

H. TYPE OF OWNERSHIP

☐ 1. FEDERAL ☐ 2. STATE ☐ 3. COMM

"103-C NOTIFICATION"

CARD SCHROEDER

PHONE: 502-564-6716

DATE: 8/10/89

K. DATE IDENTIFIED
(mo., day, & yr.)

2. TELEPHONE NUMBER

II. PRELIMINARY ASSESSMENT (complete this section last)

A. APPARENT SERIOUSNESS OF PROBLEM

☐ 1. HIGH ☐ 2. MEDIUM ☐ 3. LOW ☒ 4. NONE ☐ 5. UNKNOWN

B. RECOMMENDATION

☒ 1. NO ACTION NEEDED (no hazard)

☐ 2. IMMEDIATE SITE INSPECTION NEEDED
a. TENTATIVELY SCHEDULED FOR:

☐ 3. SITE INSPECTION NEEDED
a. TENTATIVELY SCHEDULED FOR:

b. WILL BE PERFORMED BY:

b. WILL BE PERFORMED BY:

☐ 4. SITE INSPECTION NEEDED (low priority)

C. PREPARER INFORMATION

1. NAME

2. TELEPHONE NUMBER

3. DATE (mo., day, & yr.)

III. SITE INFORMATION

A. SITE STATUS

☐ 1. ACTIVE (Those industrial or municipal sites which are being used for waste treatment, storage, or disposal on a continuing basis, even if infrequently.)

☐ 2. INACTIVE (Those sites which no longer receive wastes.)

☐ 3. OTHER (specify):
(Those sites that include such incidents like "midnight dumping" where no regular or continuing use of the site for waste disposal has occurred.)

B. IS GENERATOR ON SITE?

☐ 1. NO

☐ 2. YES (specify generator's four-digit SIC Code):

C. AREA OF SITE (in acres)

D. IF APPARENT SERIOUSNESS OF SITE IS HIGH, SPECIFY COORDINATES

1. LATITUDE (deg., min., sec.)

2. LONGITUDE (deg., min., sec.)

E. ARE THERE BUILDINGS ON THE SITE?

☐ 1. NO ☐ 2. YES (specify):

IV. CHARACTERIZATION OF SITE ACTIVITY

Indicate the major site activity(ies) and details relating to each activity by marking 'X' in the appropriate boxes.

| <input checked="" type="checkbox"/> A. TRANSPORTER | <input checked="" type="checkbox"/> B. STORER | <input checked="" type="checkbox"/> C. TREATER | <input checked="" type="checkbox"/> D. DISPOSER |
|--|---|--|---|
| 1. RAIL | 1. PILE | 1. FILTRATION | 1. LANDFILL |
| 2. SHIP | 2. SURFACE IMPOUNDMENT | 2. INCINERATION | 2. LANDFARM |
| 3. BARGE | 3. DRUMS | 3. VOLUME REDUCTION | 3. OPEN DUMP |
| 4. TRUCK | 4. TANK ABOVE GROUND | 4. RECYCLING/RECOVERY | 4. SURFACE IMPOUNDMENT |
| 5. PIPELINE | 5. TANK BELOW GROUND | 5. CHEM./PHYS. TREATMENT | 5. MOUND DUMPING |
| 6. OTHER (specify) | 6. OTHER (specify) | 6. BIOLOGICAL TREATMENT | 6. INCINERATION |
| | | 7. WASTE OIL REPROCESSING | 7. UNDERGROUND INJECTION |
| | | 8. SOLVENT RECOVERY | 8. OTHER (specify) |
| | | 9. OTHER (specify) | |

E. SPECIFY DETAILS OF SITE ACTIVITIES AS NEEDED:

V. WASTE RELATED INFORMATION

A. WASTE TYPE

☐ 1. UNKNOWN ☐ 2. LIQUID ☐ 3. SOLID ☐ 4. SLUDGE ☐ 5. GAS

B. WASTE CHARACTERISTICS

☐ 1. UNKNOWN ☐ 2. CORROSIVE ☐ 3. IGNITABLE ☐ 4. RADIOACTIVE ☐ 5. HIGHLY VOLATILE
☐ 6. TOXIC ☐ 7. REACTIVE ☐ 8. INERT ☐ 9. FLAMMABLE
☐ 10. OTHER (specify)

C. WASTE CATEGORIES

1. Are records of wastes available? Specify items such as manifests, inventories, etc. below.

2. Estimate the amount (specify unit of measure) of waste by category; mark 'X' to indicate which wastes are present.

| a. SLUDGE | b. OIL | c. SOLVENTS | d. CHEMICALS | e. RADIOACTIVES | f. OTHER |
|--|--|---|--|---|---|
| AMOUNT | AMOUNT | AMOUNT | AMOUNT | AMOUNT | AMOUNT |
| UNIT OF MEASURE | UNIT OF MEASURE | UNIT OF MEASURE | UNIT OF MEASURE | UNIT OF MEASURE | UNIT OF MEASURE |
| <input checked="" type="checkbox"/> 1. PAINT, PIGMENTS | <input checked="" type="checkbox"/> 1. OILY WASTES | <input checked="" type="checkbox"/> 1. HALOGENATED SOLVENTS | <input checked="" type="checkbox"/> 1. ACIDS | <input checked="" type="checkbox"/> 1. RADIOACTIVES | <input checked="" type="checkbox"/> 1. LABORATORY PHARMACEUT. |
| <input type="checkbox"/> 2. METALS SLUDGES | <input type="checkbox"/> 2. OTHER (specify) | <input type="checkbox"/> 2. NON-HALOGENATED SOLVENTS | <input type="checkbox"/> 2. FICKLING LIQUORS | <input type="checkbox"/> 2. APPLICATION | <input type="checkbox"/> 2. HOSPITAL |
| <input type="checkbox"/> 3. POTW | | <input type="checkbox"/> 3. OTHER (specify) | <input type="checkbox"/> 3. CAUSTICS | <input type="checkbox"/> 3. HAZARDOUS MATERIALS | <input type="checkbox"/> 3. RADIOACTIVE |
| <input type="checkbox"/> 4. ALUMINUM SLUDGE | | | <input type="checkbox"/> 4. PESTICIDES | <input type="checkbox"/> 4. HAZARDOUS WASTES | <input type="checkbox"/> 4. MUNICIPAL |
| <input type="checkbox"/> 5. OTHER (specify) | | | <input type="checkbox"/> 5. DYES/STAINS | <input type="checkbox"/> 5. HAZARDOUS WASTES | <input type="checkbox"/> 5. OTHER (specify) |
| | | | <input type="checkbox"/> 6. CYANIDE | <input type="checkbox"/> 6. HAZARDOUS WASTES | |
| | | | <input type="checkbox"/> 7. OTHER NOX. | | |
| | | | <input type="checkbox"/> 8. HALOGENS | | |
| | | | <input type="checkbox"/> 9. PCB | | |
| | | | <input type="checkbox"/> 10. METALS | | |
| | | | <input type="checkbox"/> 11. OTHER (specify) | | |

V. WASTE RELATED INFORMATION (continued)

3. LIST SUBSTANCES OF GREATEST CONCERN WHICH MAY BE ON THE SITE (place in descending order of hazard).

4. ADDITIONAL COMMENTS OR NARRATIVE DESCRIPTION OF SITUATION KNOWN OR REPORTED TO EXIST AT THE SITE.

VI. HAZARD DESCRIPTION

| A. TYPE OF HAZARD | B. POTENTIAL HAZARD (mark 'X') | C. ALLEGED INCIDENT (mark 'X') | D. DATE OF INCIDENT (mo., day, yr.) | E. REMARKS |
|--|--------------------------------|--------------------------------|-------------------------------------|------------|
| 1. NO HAZARD | | | | |
| 2. HUMAN HEALTH | | | | |
| 3. NON-WORKER INJURY/EXPOSURE | | | | |
| 4. WORKER INJURY | | | | |
| 5. CONTAMINATION OF WATER SUPPLY | | | | |
| 6. CONTAMINATION OF FOOD CHAIN | | | | |
| 7. CONTAMINATION OF GROUND WATER | | | | |
| 8. CONTAMINATION OF SURFACE WATER | | | | |
| 9. DAMAGE TO FLORA/FAUNA | | | | |
| 10. FISH KILL | | | | |
| 11. CONTAMINATION OF AIR | | | | |
| 12. NOTICEABLE ODORS | | | | |
| 13. CONTAMINATION OF SOIL | | | | |
| 14. PROPERTY DAMAGE | | | | |
| 15. FIRE OR EXPLOSION | | | | |
| 16. SPILLS/LEAKING CONTAINERS/ RUNOFF/STANDING LIQUIDS | | | | |
| 17. SEWER, STORM DRAIN PROBLEMS | | | | |
| 18. EROSION PROBLEMS | | | | |
| 19. INADEQUATE SECURITY | | | | |
| 20. INCOMPATIBLE WASTES | | | | |
| 21. MIDNIGHT DUMPING | | | | |
| 22. OTHER (specify): | | | | |

VII. PERMIT INFORMATION

A. INDICATE ALL APPLICABLE PERMITS HELD BY THE SITE.

- ☐ 1. NPDES PERMIT ☐ 2. SPCC PLAN ☐ 3. STATE PERMIT/specify: _____
☐ 4. AIR PERMITS ☐ 5. LOCAL PERMIT ☐ 6. RCRA TRANSPORTER
☐ 7. RCRA STORER ☐ 8. RCRA TREATER ☐ 9. RCRA DISPOSER
☐ 10. OTHER (specify): _____

B. IN COMPLIANCE?

- ☐ 1. YES ☐ 2. NO ☐ 3. UNKNOWN

4. WITH RESPECT TO (list regulation name & number): _____

VIII. PAST REGULATORY ACTIONS

- ☐ A. NONE ☐ B. YES (summarize below)

IX. INSPECTION ACTIVITY (past or on-going)

- ☐ A. NONE ☐ B. YES (complete items 1, 2, 3, & 4 below)

| 1. TYPE OF ACTIVITY | 2. DATE OF PAST ACTION (mo., day, & yr.) | 3. PERFORMED BY: (EPA/State) | 4. DESCRIPTION |
|---------------------|--|------------------------------|----------------|
| | | | |
| | | | |
| | | | |

X. REMEDIAL ACTIVITY (past or on-going)

- ☐ A. NONE ☐ B. YES (complete items 1, 2, 3, & 4 below)

| 1. TYPE OF ACTIVITY | 2. DATE OF PAST ACTION (mo., day, & yr.) | 3. PERFORMED BY: (EPA/State) | 4. DESCRIPTION |
|---------------------|--|------------------------------|----------------|
| | | | |
| | | | |
| | | | |

NOTE: Based on the information in Sections III through X, fill out the Preliminary Assessment (Section II) information on the first page of this form.



POTENTIAL HAZARDOUS WASTE SITE IDENTIFICATION AND PRELIMINARY ASSESSMENT

REGION

SITE NUMBER (to be assigned by HQ)

NOTE: This form is completed for each potential hazardous waste site to help set priorities for site inspection. The information submitted on this form is based on available records and may be updated on subsequent forms as a result of additional inquiries and on-site inspections.

GENERAL INSTRUCTIONS: Complete Sections I and III through V -- completely as possible before Section II (Preliminary Assessment). File this form in the file for the site and submit a copy to: U.S. Environmental Protection Agency (EN-335); 401 M St., SW; Washington, DC 20460.

KYD980557078 JEFFERSON
OUTER LOOP LANDFILL
1901 OUTER LOOP
LOUISVILLE KY 40219
DUNLAP, PETER, DIR, ENV * 6173678300

Mobile Waste

TION

ET (or other identifier)

E

E. ZIP CODE

F. COUNTY NAME

2. TELEPHONE NUMBER

H. TYPE OF OWNERSHIP

☐ 1. FEDERAL ☐ 2. STATE ☐ 3. COUNTY ☐ 4. MUNICIPAL ☒ 5. PRIVATE ☐ 6. UNKNOWN

I.

"103-C NOTIFICATION" DATE: 810609
CARL SCHROEDER
PHONE: 502-564-8716

K. DATE IDENTIFIED
(mo., day, & yr.)

2. TELEPHONE NUMBER

II. PRELIMINARY ASSESSMENT (complete this section last)

A. APPARENT SERIOUSNESS OF PROBLEM

☐ 1. HIGH ☐ 2. MEDIUM ☐ 3. LOW ☒ 4. NONE ☐ 5. UNKNOWN

B. RECOMMENDATION

☒ 1. NO ACTION NEEDED (no hazard)

☐ 2. IMMEDIATE SITE INSPECTION NEEDED
a. TENTATIVELY SCHEDULED FOR:

☐ 3. SITE INSPECTION NEEDED
a. TENTATIVELY SCHEDULED FOR:

b. WILL BE PERFORMED BY:

b. WILL BE PERFORMED BY:

☐ 4. SITE INSPECTION NEEDED (low priority)

C. PREPARER INFORMATION

1. NAME

2. TELEPHONE NUMBER

3. DATE (mo., day, & yr.)

82 12 01

III. SITE INFORMATION

A. SITE STATUS

☐ 1. ACTIVE (Those industrial or municipal sites which are being used for waste treatment, storage, or disposal on a continuing basis, even if infrequently.)

☐ 2. INACTIVE (Those sites which no longer receive wastes.)

☐ 3. OTHER (specify): (Those sites that include such incidents like "midnight dumping" where no regular or continuing use of the site for waste disposal has occurred.)

B. IS GENERATOR ON SITE?

☐ 1. NO

☐ 2. YES (specify generator's four-digit SIC Code):

C. AREA OF SITE (in acres)

D. IF APPARENT SERIOUSNESS OF SITE IS HIGH, SPECIFY COORDINATES

1. LATITUDE (deg., min., sec.)

2. LONGITUDE (deg., min., sec.)

E. ARE THERE BUILDINGS ON THE SITE?

☐ 1. NO

☐ 2. YES (specify):

IV. CHARACTERIZATION OF SITE ACTIVITY

Indicate the major site activity(ies) and details relating to each activity by marking 'X' in the appropriate boxes.

| <input checked="" type="checkbox"/> A. TRANSPORTER | <input checked="" type="checkbox"/> B. STORER | <input checked="" type="checkbox"/> C. TREATER | <input checked="" type="checkbox"/> D. DISPOSER |
|--|---|--|---|
| 1. RAIL | 1. PILE | 1. FILTRATION | 1. LANDFILL |
| 2. SHIP | 2. SURFACE IMPOUNDMENT | 2. INCINERATION | 2. LANDFARM |
| 3. BARGE | 3. DRUMS | 3. VOLUME REDUCTION | 3. OPEN DUMP |
| 4. TRUCK | 4. TANK, ABOVE GROUND | 4. RECYCLING/RECOVERY | 4. SURFACE IMPOUNDMENT |
| 5. PIPELINE | 5. TANK, BELOW GROUND | 5. CHEM./PHYS. TREATMENT | 5. MIDNIGHT DUMPING |
| 6. OTHER (specify): | 6. OTHER (specify): | 6. BIOLOGICAL TREATMENT | 6. INCINERATION |
| | | 7. WASTE OIL REPROCESSING | 7. UNDERGROUND INJECTION |
| | | 8. SOLVENT RECOVERY | 8. OTHER (specify): |
| | | 9. OTHER (specify): | |

E. SPECIFY DETAILS OF SITE ACTIVITIES AS NEEDED

V. WASTE RELATED INFORMATION

A. WASTE TYPE

☐ 1 UNKNOWN ☐ 2 LIQUID ☐ 3. SOLID ☐ 4 SLUDGE ☐ 5. GAS

B. WASTE CHARACTERISTICS

☐ 1 UNKNOWN ☐ 2. CORROSIVE ☐ 3. IGNITABLE ☐ 4 RADIOACTIVE ☐ 5 HIGHLY VOLATILE
☐ 6 TOXIC ☐ 7 REACTIVE ☐ 8 INERT ☐ 9 FLAMMABLE
☐ 10. OTHER (specify):

C. WASTE CATEGORIES

1. Are records of wastes available? Specify items such as manifests, inventories, etc. below.

2. Estimate the amount (specify unit of measure) of waste by category; mark 'X' to indicate which wastes are present.

| a. SLUDGE | b. OIL | c. SOLVENTS | d. CHEMICALS | e. SOLIDS | f. OTHER |
|---|---|--|---|--|--|
| AMOUNT | AMOUNT | AMOUNT | AMOUNT | AMOUNT | AMOUNT |
| UNIT OF MEASURE | UNIT OF MEASURE | UNIT OF MEASURE | UNIT OF MEASURE | UNIT OF MEASURE | UNIT OF MEASURE |
| <input checked="" type="checkbox"/> (1) PAINT, PIGMENTS | <input checked="" type="checkbox"/> (1) OILY WASTES | <input checked="" type="checkbox"/> (1) HALOGENATED SOLVENTS | <input checked="" type="checkbox"/> (1) ACIDS | <input checked="" type="checkbox"/> (1) FLYASH | <input checked="" type="checkbox"/> (1) LABORATORY PHARMACEUT. |
| (2) METALS SLUDGES | (2) OTHER (specify): | (2) NON-HALOGENATED SOLVENTS | (2) PICKLING LIQUORS | (2) ASBESTOS | (2) HOSPITAL |
| (3) POTW | | (3) OTHER (specify): | (3) CAUSTICS | (3) MILLING/ MINE TAILINGS | (3) RADIOACTIVE |
| (4) ALUMINUM SLUDGE | | | (4) PESTICIDES | (4) FERROUS SMELTING WASTES | (4) MUNICIPAL |
| (5) OTHER (specify): | | | (5) DYES/INKS | (5) NON-FERROUS SMELTING WASTES | (5) OTHER (specify): |
| | | | (6) CYANIDE | (6) OTHER (specify): | |
| | | | (7) PHENOLS | | |
| | | | (8) HALOGENS | | |
| | | | (9) PCB | | |
| | | | (10) METALS | | |
| | | | (11) OTHER (specify): | | |

V. WASTE RELATED INFORMATION (continued)

3. LIST SUBSTANCES OF GREATEST CONCERN WHICH MAY BE ON THE SITE (place in descending order of hazard).

4. ADDITIONAL COMMENTS OR NARRATIVE DESCRIPTION OF SITUATION KNOWN OR REPORTED TO EXIST AT THE SITE.

VI. HAZARD DESCRIPTION

| A. TYPE OF HAZARD | B. POTENTIAL HAZARD (mark 'X') | C. ALLEGED INCIDENT (mark 'X') | D. DATE OF INCIDENT (mo., day, yr.) | E. REMARKS |
|--|--------------------------------|--------------------------------|-------------------------------------|------------|
| 1. NO HAZARD | | | | |
| 2. HUMAN HEALTH | | | | |
| 3. NON-WORKER INJURY/EXPOSURE | | | | |
| 4. WORKER INJURY | | | | |
| 5. CONTAMINATION OF WATER SUPPLY | | | | |
| 6. CONTAMINATION OF FOOD CHAIN | | | | |
| 7. CONTAMINATION OF GROUND WATER | | | | |
| 8. CONTAMINATION OF SURFACE WATER | | | | |
| 9. DAMAGE TO FLORA/FAUNA | | | | |
| 10. FISH KILL | | | | |
| 11. CONTAMINATION OF AIR | | | | |
| 12. NOTICEABLE ODORS | | | | |
| 13. CONTAMINATION OF SOIL | | | | |
| 14. PROPERTY DAMAGE | | | | |
| 15. FIRE OR EXPLOSION | | | | |
| 16. SPILLS/LEAKING CONTAINERS/ RUNOFF/STANDING LIQUIDS | | | | |
| 17. SEWER, STORM DRAIN PROBLEMS | | | | |
| 18. EROSION PROBLEMS | | | | |
| 19. INADEQUATE SECURITY | | | | |
| 20. INCOMPATIBLE WASTES | | | | |
| 21. MIDNIGHT DUMPING | | | | |
| 22. OTHER (specify): | | | | |

VII. PERMIT INFORMATION

A. INDICATE ALL APPLICABLE PERMITS HELD BY THE SITE.

- ☐ 1. NPDES PERMIT ☐ 2. SPCC PLAN ☐ 3. STATE PERMIT (specify): _____
☐ 4. AIR PERMITS ☐ 5. LOCAL PERMIT ☐ 6. RCRA TRANSPORTER
☐ 7. RCRA STORER ☐ 8. RCRA TREATER ☐ 9. RCRA DISPOSER
☐ 10. OTHER (specify): _____

B. IN COMPLIANCE?

- ☐ 1. YES ☐ 2. NO ☐ 3. UNKNOWN

4. WITH RESPECT TO (list regulation name & number): _____

VIII. PAST REGULATORY ACTIONS

- ☐ A. NONE ☐ B. YES (summarize below)

IX. INSPECTION ACTIVITY (past or on-going)

- ☐ A. NONE ☐ B. YES (complete items 1, 2, 3, & 4 below)

| 1. TYPE OF ACTIVITY | 2. DATE OF PAST ACTION (mo., day, & yr.) | 3. PERFORMED BY: (EPA/State) | 4. DESCRIPTION |
|---------------------|--|------------------------------|----------------|
| | | | |
| | | | |
| | | | |

X. REMEDIAL ACTIVITY (past or on-going)

- ☐ A. NONE ☐ B. YES (complete items 1, 2, 3, & 4 below)

| 1. TYPE OF ACTIVITY | 2. DATE OF PAST ACTION (mo., day, & yr.) | 3. PERFORMED BY: (EPA/State) | 4. DESCRIPTION |
|---------------------|--|------------------------------|----------------|
| | | | |
| | | | |
| | | | |

NOTE: Based on the information in Sections III through X, fill out the Preliminary Assessment (Section II) information on the first page of this form.



POTENTIAL HAZARDOUS WASTE SITE
IDENTIFICATION AND PRELIMINARY ASSESSMENT

REGION IV SITE NUMBER (to be assigned by RC)
KY 00000680
KYD 7805527078

NOTE: This form is completed for each potential hazardous waste site to help set priorities for site inspection. The information submitted on this form is based on available records and may be updated on subsequent forms as a result of additional inquiries and on-site inspections.

GENERAL INSTRUCTIONS: Complete Sections I and III through X as completely as possible before Section II (Preliminary Assessment). File this form in the Regional Hazardous Waste Log File and submit a copy to: U.S. Environmental Protection Agency; Site Tracking System; Hazardous Waste Enforcement Task Force (EN-335); 401 M St., SW; Washington, DC 20460.

I. SITE IDENTIFICATION

| | | | |
|--|----------------|--|-----------------------------|
| A. SITE NAME Mobile Waste Control Inc. | | B. STREET (or other identifier) 7100 Grade Lane | |
| C. CITY Louisville | D. STATE KY | E. ZIP CODE | F. COUNTY NAME Jefferson |
| G. OWNER/OPERATOR (if known) 1. NAME same | | | |
| H. TYPE OF OWNERSHIP <input type="checkbox"/> 1. FEDERAL <input type="checkbox"/> 2. STATE <input type="checkbox"/> 3. COUNTY | | | |
| I. SITE DESCRIPTION 71 acre sanitary landfill located : | | | |
| J. HOW IDENTIFIED (i.e., citizen's complaint, OSHA citation) Eckhardt report | | | |
| K. PRINCIPAL STATE CONTACT 1. NAME Pat Haight | | | |

KYD 068 347 632 same name, # is different. This is 2673 Quince Loop Rd Louisville KY 40219 Jefferson

The above is in Wasteland. Different street - look in Circle's for 7100 Grade Lane

II. PRELIMINARY

| | |
|---|--|
| A. APPARENT SERIOUSNESS OF PROBLEM <input type="checkbox"/> 1. HIGH <input type="checkbox"/> 2. MEDIUM <input checked="" type="checkbox"/> 3. LOW | |
| B. RECOMMENDATION <input checked="" type="checkbox"/> 1. NO ACTION NEEDED (no hazard) <input type="checkbox"/> 2. IMMEDIATE SITE INSPECTION NEEDED a. TENTATIVELY SCHEDULED FOR: b. WILL BE PERFORMED BY: | |
| C. PREPARER INFORMATION 1. NAME Carl Horneman | |
| D. IF APPARENT SERIOUSNESS OF SITE IS HIGH, SPECIFY COORDINATES 1. LATITUDE (deg.-min.-sec.) 2. LONGITUDE (deg.-min.-sec.) | |
| E. ARE THERE BUILDINGS ON THE SITE? (if in problem area) <input checked="" type="checkbox"/> 1. NO <input type="checkbox"/> 2. YES (specify): | |

KYD 980 729 164 LANDFILL INC 7500 GRADE LN Louisville KY 40219

4 blocks away not close enough

This is in Wasteland too

IV. CHARACTERIZATION OF SITE ACTIVITY

Indicate the major site activity(ies) and details relating to each activity by marking 'X' in the appropriate boxes.

| A. TRANSPORTER | | B. STORER | | C. TREATER | | D. DISPOSER | |
|--|---|--|---|------------|--|-------------|--|
| <input checked="" type="checkbox"/> 1. RAIL | <input checked="" type="checkbox"/> 1. PILE | <input checked="" type="checkbox"/> 1. FILTRATION | <input checked="" type="checkbox"/> 1. LANDFILL | | | | |
| <input type="checkbox"/> 2. SHIP | <input type="checkbox"/> 2. SURFACE IMPOUNDMENT | <input type="checkbox"/> 2. INCINERATION | <input type="checkbox"/> 2. LANDFARM | | | | |
| <input type="checkbox"/> 3. BARGE | <input type="checkbox"/> 3. DRUMS | <input type="checkbox"/> 3. VOLUME REDUCTION | <input type="checkbox"/> 3. OPEN DUMP | | | | |
| <input checked="" type="checkbox"/> 4. TRUCK | <input type="checkbox"/> 4. TANK, ABOVE GROUND | <input type="checkbox"/> 4. RECYCLING/RECOVERY | <input type="checkbox"/> 4. SURFACE IMPOUNDMENT | | | | |
| <input type="checkbox"/> 5. PIPELINE | <input type="checkbox"/> 5. TANK, BELOW GROUND | <input type="checkbox"/> 5. CHEM./PHYS. TREATMENT | <input type="checkbox"/> 5. MIDDNIGHT DUMPING | | | | |
| <input type="checkbox"/> 6. OTHER (specify): | <input type="checkbox"/> 6. OTHER (specify): | <input type="checkbox"/> 6. BIOLOGICAL TREATMENT | <input type="checkbox"/> 6. INCINERATION | | | | |
| | | <input type="checkbox"/> 7. WASTE OIL REPROCESSING | <input type="checkbox"/> 7. UNDERGROUND INJECTION | | | | |
| | | <input type="checkbox"/> 8. SOLVENT RECOVERY | <input type="checkbox"/> 8. OTHER (specify): | | | | |
| | | <input type="checkbox"/> 9. OTHER (specify): | | | | | |

E. SPECIFY DETAILS OF SITE ACTIVITIES AS NEEDED

A leachate collection system has been installed on part of fill area.

V. WASTE RELATED INFORMATION

A. WASTE TYPE

☒ 1. UNKNOWN ☐ 2. LIQUID ☐ 3. SOLID ☐ 4. SLUDGE ☐ 5. GAS

B. WASTE CHARACTERISTICS

☒ 1. UNKNOWN ☐ 2. CORROSIVE ☐ 3. IGNITABLE ☐ 4. RADIOACTIVE ☐ 5. HIGHLY VOLATILE
☐ 6. TOXIC ☐ 7. REACTIVE ☐ 8. INERT ☐ 9. FLAMMABLE

☐ 10. OTHER (specify):

C. WASTE CATEGORIES

1. Are records of wastes available? Specify items such as manifests, inventories, etc. below.

2. Estimate the amount (specify unit of measure) of waste by category; mark 'X' to indicate which wastes are present.

| a. SLUDGE | | b. OIL | | c. SOLVENTS | | d. CHEMICALS | | e. SOLIDS | | f. OTHER | |
|---|-----------------|---|-----------------|--|-----------------|--|-----------------|--|-----------------|--|-----------------|
| AMOUNT | UNIT OF MEASURE | AMOUNT | UNIT OF MEASURE | AMOUNT | UNIT OF MEASURE | AMOUNT | UNIT OF MEASURE | AMOUNT | UNIT OF MEASURE | AMOUNT | UNIT OF MEASURE |
| <input checked="" type="checkbox"/> (1) PAINT, PIGMENTS | | <input checked="" type="checkbox"/> (1) OILY WASTES | | <input checked="" type="checkbox"/> (1) HALOGENATED SOLVENTS | | <input checked="" type="checkbox"/> (1) ACIDS | | <input checked="" type="checkbox"/> (1) FLYASH | | <input checked="" type="checkbox"/> (1) LABORATORY PHARMACEUT. | |
| <input type="checkbox"/> (2) METALS SLUDGES | | <input type="checkbox"/> (2) OTHER (specify): | | <input type="checkbox"/> (2) NON-HALOGENATED SOLVENTS | | <input type="checkbox"/> (2) PICKLING LIQUORS | | <input type="checkbox"/> (2) ASBESTOS | | <input type="checkbox"/> (2) HOSPITAL | |
| <input type="checkbox"/> (3) PCTW | | | | <input type="checkbox"/> (3) OTHER (specify): | | <input type="checkbox"/> (3) CAUSTICS | | <input type="checkbox"/> (3) MILLING/MINE TAILINGS | | <input type="checkbox"/> (3) RADIOACTIVE | |
| <input type="checkbox"/> (4) ALUMINUM SLUDGE | | | | | | <input type="checkbox"/> (4) PESTICIDES | | <input type="checkbox"/> (4) FERROUS SMELTING WASTES | | <input type="checkbox"/> (4) MUNICIPAL | |
| <input type="checkbox"/> (5) OTHER (specify): | | | | | | <input type="checkbox"/> (5) DYES/INKS | | <input type="checkbox"/> (5) NON-FERROUS SMELTING WASTES | | <input type="checkbox"/> (5) OTHER (specify): | |
| | | | | | | <input type="checkbox"/> (6) CYANIDE | | <input type="checkbox"/> (6) OTHER (specify): | | | |
| | | | | | | <input type="checkbox"/> (7) PHENOLS | | | | | |
| | | | | | | <input type="checkbox"/> (8) HALOGENS | | | | | |
| | | | | | | <input type="checkbox"/> (9) PCB | | | | | |
| | | | | | | <input type="checkbox"/> (10) METALS | | | | | |
| | | | | | | <input type="checkbox"/> (11) OTHER (specify): | | | | | |

V. WASTE RELATED INFORMATION (continued)

3. LIST SUBSTANCES OF GREATEST CONCERN WHICH MAY BE ON THE SITE (place in descending order of hazard).

It is possible small quantities of organics and heavy metals were buried here in past years.

4. ADDITIONAL COMMENTS OR NARRATIVE DESCRIPTION OF SITUATION KNOWN OR REPORTED TO EXIST AT THE SITE.

VI. HAZARD DESCRIPTION

| A. TYPE OF HAZARD | B. POTENTIAL HAZARD (mark 'X') | C. ALLEGED INCIDENT (mark 'X') | D. DATE OF INCIDENT (mo., day, yr.) | E. REMARKS |
|--|--------------------------------|--------------------------------|-------------------------------------|------------|
| 1. NO HAZARD | | | | |
| 2. HUMAN HEALTH | | | | |
| 3. NON-WORKER INJURY/EXPOSURE | | | | |
| 4. WORKER INJURY | | | | |
| 5. CONTAMINATION OF WATER SUPPLY | | | | |
| 6. CONTAMINATION OF FOOD CHAIN | | | | |
| 7. CONTAMINATION OF GROUND WATER | X | | | |
| 8. CONTAMINATION OF SURFACE WATER | | | | |
| 9. DAMAGE TO FLORA/FAUNA | | | | |
| 10. FISH KILL | | | | |
| 11. CONTAMINATION OF AIR | | | | |
| 12. NOTICEABLE ODORS | | | | |
| 13. CONTAMINATION OF SOIL | | | | |
| 14. PROPERTY DAMAGE | | | | |
| 15. FIRE OR EXPLOSION | | | | |
| 16. SPILLS/LEAKING CONTAINERS/ RUNOFF/STANDING LIQUIDS | | | | |
| 17. SEWER, STORM DRAIN PROBLEMS | | | | |
| 18. EROSION PROBLEMS | | | | |
| 19. INADEQUATE SECURITY | | | | |
| 20. INCOMPATIBLE WASTES | | | | |
| 21. MIDNIGHT DUMPING | | | | |
| 22. OTHER (specify): | | | | |

VII. PERMIT INFORMATION

A. INDICATE ALL APPLICABLE PERMITS HELD BY THE SITE.

- ☐ 1. NPDES PERMIT ☐ 2. SPCC PLAN ☒ 3. STATE PERMIT (specify) Solid waste permit #056.08
☐ 4. AIR PERMITS ☐ 5. LOCAL PERMIT ☐ 6. RCRA TRANSPORTER
☐ 7. RCRA STORER ☐ 8. RCRA TREATER ☐ 9. RCRA DISPOSER
☐ 10. OTHER (specify): _____

B. IN COMPLIANCE?

- ☒ 1. YES ☐ 2. NO ☐ 3. UNKNOWN

4. WITH RESPECT TO (list regulation name & number): _____

VIII. PAST REGULATORY ACTIONS

- ☒ A. NONE ☐ B. YES (summarize below)

IX. INSPECTION ACTIVITY (past or on-going)

- ☐ A. NONE ☒ B. YES (complete items 1, 2, 3, & 4 below)

| 1. TYPE OF ACTIVITY | 2. DATE OF PAST ACTION (mo., day, & yr.) | 3. PERFORMED BY: (EPA/State) | 4. DESCRIPTION |
|---------------------|--|------------------------------|--|
| Inspection | 1-15-80 | State | A few low spots in cover on old part of fill and leachate breaking out at one point. |
| | | | |
| | | | |

X. REMEDIAL ACTIVITY (past or on-going)

- ☐ A. NONE ☐ B. YES (complete items 1, 2, 3, & 4 below)

| 1. TYPE OF ACTIVITY | 2. DATE OF PAST ACTION (mo., day, & yr.) | 3. PERFORMED BY: (EPA/State) | 4. DESCRIPTION |
|---------------------|--|------------------------------|----------------|
| | | | |
| | | | |
| | | | |

NOTE: Based on the information in Sections III through X, fill out the Preliminary Assessment (Section II) information on the first page of this form.



POTENTIAL HAZARDOUS WASTE SITE **NOTES +**
IDENTIFICATION AND PRELIMINARY ASSESSMENT **375**

REGION **5** SITE NUMBER (to be assigned by HQ)
KYD-980552070
52

NOTE: This form is completed for each potential hazardous waste site to help set priorities for site inspection. The information submitted on this form is based on available records and may be updated on subsequent forms as a result of additional inquiries and on-site inspections.

GENERAL INSTRUCTIONS: Complete Sections I and II through X as completely as possible before Section II (Preliminary Assessment). File this form in the Regional Hazardous Waste Log File and submit a copy to: U.S. Environmental Protection Agency; Site Tracking System; Hazardous Waste Enforcement Task Force (EN-335); 401 M St., SW; Washington, DC 20460.

I. SITE IDENTIFICATION

| | | | |
|---|----------------|--|-----------------------------|
| A. SITE NAME Mobile Waste Control Inc. | | B. STREET (or other identifier) 7100 Grade Lane | |
| C. CITY Louisville | D. STATE KY | E. ZIP CODE | F. COUNTY NAME Jefferson |
| G. OWNER/OPERATOR (if known) 1. NAME same | | 2. TELEPHONE NUMBER | |
| H. TYPE OF OWNERSHIP <input type="checkbox"/> 1. FEDERAL <input type="checkbox"/> 2. STATE <input type="checkbox"/> 3. COUNTY <input type="checkbox"/> 4. MUNICIPAL <input checked="" type="checkbox"/> 5. PRIVATE <input type="checkbox"/> 6. UNKNOWN | | | |

I. SITE DESCRIPTION

71 acre sanitary landfill located in the 7300 block of Grade Lane

J. HOW IDENTIFIED (i.e., citizen's complaints, OSHA citations, etc.)

Eckhardt report

K. DATE IDENTIFIED
(mo., day, & yr.)

L. PRINCIPAL STATE CONTACT

1. NAME

Pat Haight

2. TELEPHONE NUMBER

(502) 564-6716

II. PRELIMINARY ASSESSMENT (complete this section last)

A. APPARENT SERIOUSNESS OF PROBLEM

☐ 1. HIGH ☐ 2. MEDIUM ☒ 3. LOW ☐ 4. NONE ☐ 5. UNKNOWN

B. RECOMMENDATION

☒ 1. NO ACTION NEEDED (no hazard)

☐ 2. IMMEDIATE SITE INSPECTION NEEDED
a. TENTATIVELY SCHEDULED FOR:

☐ 3. SITE INSPECTION NEEDED
a. TENTATIVELY SCHEDULED FOR:

b. WILL BE PERFORMED BY:

b. WILL BE PERFORMED BY:

☐ 4. SITE INSPECTION NEEDED (low priority)

C. PREPARER INFORMATION

1. NAME

Carl Horneman

2. TELEPHONE NUMBER

(502) 588-4254

3. DATE (mo., day, & yr.)

1-15-80

III. SITE INFORMATION

A. SITE STATUS

☒ 1. ACTIVE (Those industrial or municipal sites which are being used for waste treatment, storage, or disposal on a continuing basis, even if infrequently.)

☐ 2. INACTIVE (Those sites which no longer receive wastes.)

☐ 3. OTHER (specify):
(those sites that include such incidents like "midnight dumping" where no regular or continuing use of the site for waste disposal has occurred.)

B. IS GENERATOR ON SITE?

☒ 1. NO

☐ 2. YES (specify generator's four-digit SIC Code):

C. AREA OF SITE (in acres) (problem)

71 acre

D. IF APPARENT SERIOUSNESS OF SITE IS HIGH, SPECIFY COORDINATES

1. LATITUDE (deg.-min.-sec.)

2. LONGITUDE (deg.-min.-sec.)

E. ARE THERE BUILDINGS ON THE SITE? (if in problem area)

☒ 1. NO

☐ 2. YES (specify):

Indicate the major site activity(ies) and details relating to each activity by marking 'X' in the appropriate boxes.

| A. TRANSPORTER | TORER | C. TREATER | D. DISPOSER |
|--|---|--|---|
| <input checked="" type="checkbox"/> 1. RAIL | <input checked="" type="checkbox"/> 1. PILE | <input checked="" type="checkbox"/> 1. FILTRATION | <input checked="" type="checkbox"/> 1. LANDFILL |
| <input type="checkbox"/> 2. SHIP | <input type="checkbox"/> 2. SURFACE IMPOUNDMENT | <input type="checkbox"/> 2. INCINERATION | <input type="checkbox"/> 2. LANDFARM |
| <input type="checkbox"/> 3. BARGE | <input type="checkbox"/> 3. DRUMS | <input type="checkbox"/> 3. VOLUME REDUCTION | <input type="checkbox"/> 3. OPEN DUMP |
| <input checked="" type="checkbox"/> 4. TRUCK | <input type="checkbox"/> 4. TANK, ABOVE GROUND | <input type="checkbox"/> 4. RECYCLING/RECOVERY | <input type="checkbox"/> 4. SURFACE IMPOUNDMENT |
| <input type="checkbox"/> 5. PIPELINE | <input type="checkbox"/> 5. TANK, BELOW GROUND | <input type="checkbox"/> 5. CHEM./PHYS. TREATMENT | <input type="checkbox"/> 5. MIDDY DUMPING |
| <input type="checkbox"/> 6. OTHER (specify): | <input type="checkbox"/> 6. OTHER (specify): | <input type="checkbox"/> 6. BIOLOGICAL TREATMENT | <input type="checkbox"/> 6. INCINERATION |
| | | <input type="checkbox"/> 7. WASTE OIL REPROCESSING | <input type="checkbox"/> 7. UNDERGROUND INJECTION |
| | | <input type="checkbox"/> 8. SOLVENT RECOVERY | <input type="checkbox"/> 8. OTHER (specify): |
| | | <input type="checkbox"/> 9. OTHER (specify): | |

E. SPECIFY DETAILS OF SITE ACTIVITIES AS NEEDED

A leachate collection system has been installed on part of fill area.

V. WASTE RELATED INFORMATION

A. WASTE TYPE

☒ 1. UNKNOWN ☐ 2. LIQUID ☐ 3. SOLID ☐ 4. SLUDGE ☐ 5. GAS

B. WASTE CHARACTERISTICS

☒ 1. UNKNOWN ☐ 2. CORROSIVE ☐ 3. IGNITABLE ☐ 4. RADIOACTIVE ☐ 5. HIGHLY VOLATILE
☐ 6. TOXIC ☐ 7. REACTIVE ☐ 8. INERT ☐ 9. FLAMMABLE

☐ 10. OTHER (specify):

C. WASTE CATEGORIES

1. Are records of wastes available? Specify items such as manifests, inventories, etc. below.

2. Estimate the amount (specify unit of measure) of waste by category; mark 'X' to indicate which wastes are present.

| a. SLUDGE | b. OIL | c. SOLVENTS | d. CHEMICALS | e. SOLIDS | f. OTHER |
|---|---|--|--|--|--|
| AMOUNT | AMOUNT | AMOUNT | AMOUNT | AMOUNT | AMOUNT |
| UNIT OF MEASURE | UNIT OF MEASURE | UNIT OF MEASURE | UNIT OF MEASURE | UNIT OF MEASURE | UNIT OF MEASURE |
| <input checked="" type="checkbox"/> (1) PAINT, PIGMENTS | <input checked="" type="checkbox"/> (1) OILY WASTES | <input checked="" type="checkbox"/> (1) HALOGENATED SOLVENTS | <input checked="" type="checkbox"/> (1) ACIDS | <input checked="" type="checkbox"/> (1) FLYASH | <input checked="" type="checkbox"/> (1) LABORATORY PHARMACEUT. |
| <input type="checkbox"/> (2) METALS SLUDGES | <input type="checkbox"/> (2) OTHER (specify): | <input type="checkbox"/> (2) NON-HALOGENATED SOLVENTS | <input type="checkbox"/> (2) PICKLING LIQUORS | <input type="checkbox"/> (2) ASBESTOS | <input type="checkbox"/> (2) HOSPITAL |
| <input type="checkbox"/> (3) PCW | | <input type="checkbox"/> (3) OTHER (specify): | <input type="checkbox"/> (3) CAUSTICS | <input type="checkbox"/> (3) MILLING/ MINE TAILINGS | <input type="checkbox"/> (3) RADIOACTIVE |
| <input type="checkbox"/> (4) ALUMINUM SLUDGE | | | <input type="checkbox"/> (4) PESTICIDES | <input type="checkbox"/> (4) FERROUS SMLTG. WASTES | <input type="checkbox"/> (4) MUNICIPAL |
| <input type="checkbox"/> (5) OTHER (specify): | | | <input type="checkbox"/> (5) DYES/INKS | <input type="checkbox"/> (5) NON-FERROUS SMLTG. WASTES | <input type="checkbox"/> (5) OTHER (specify): |
| | | | <input type="checkbox"/> (6) CYANIDE | <input type="checkbox"/> (6) OTHER (specify): | |
| | | | <input type="checkbox"/> (7) PHENOLS | | |
| | | | <input type="checkbox"/> (8) HALOGENS | | |
| | | | <input type="checkbox"/> (9) PCB | | |
| | | | <input type="checkbox"/> (10) METALS | | |
| | | | <input type="checkbox"/> (11) OTHER (specify): | | |

3. LIST SUBSTANCES OF GREATEST CONCERN WHICH MAY BE ON THE SITE (place in descending order of hazard).
 It is possible small quantities of organics and heavy metal were buried here in past years.

4. ADDITIONAL COMMENTS OR NARRATIVE DESCRIPTION OF SITUATION KNOWN OR REPORTED TO EXIST AT THE SITE.

VI. HAZARD DESCRIPTION

| A. TYPE OF HAZARD | B. POTENTIAL HAZARD (mark 'X') | C. ALLEGED INCIDENT (mark 'X') | D. DATE OF INCIDENT (mo., day, yr.) | E. REMARKS |
|---|--------------------------------|--------------------------------|-------------------------------------|------------|
| 1. NO HAZARD | | | | |
| 2. HUMAN HEALTH | | | | |
| 3. NON-WORKER INJURY/EXPOSURE | | | | |
| 4. WORKER INJURY | | | | |
| 5. CONTAMINATION OF WATER SUPPLY | | | | |
| 6. CONTAMINATION OF FOOD CHAIN | | | | |
| 7. CONTAMINATION OF GROUND WATER | X | | | |
| 8. CONTAMINATION OF SURFACE WATER | | | | |
| 9. DAMAGE TO FLORA/FAUNA | | | | |
| 10. FISH KILL | | | | |
| 11. CONTAMINATION OF AIR | | | | |
| 12. NOTICEABLE ODORS | | | | |
| 13. CONTAMINATION OF SOIL | | | | |
| 14. PROPERTY DAMAGE | | | | |
| 15. FIRE OR EXPLOSION | | | | |
| 16. SPILLS/LEAKING CONTAINERS/RUNOFF/STANDING LIQUIDS | | | | |
| 17. SEWER, STORM DRAIN PROBLEMS | | | | |
| 18. EROSION PROBLEMS | | | | |
| 19. INADEQUATE SECURITY | | | | |
| 20. INCOMPATIBLE WASTES | | | | |
| 21. MIDNIGHT DUMPING | | | | |
| 22. OTHER (specify): | | | | |

VII. PERMIT INFORMATION

A. INDICATE ALL APPLICABLE PERMITS HELD BY THE SITE.

- ☐ 1. NPDES PERMIT ☐ 2. SPCC PLAN ☒ 3. STATE PERMIT (specify): Solid Waste permit #056.08
☐ 4. AIR PERMITS ☐ 5. LOCAL PERMIT ☐ 6. RCRA TRANSPORTER
☐ 7. RCRA STORER ☐ 8. RCRA TREATER ☐ 9. RCRA DISPOSER
☐ 10. OTHER (specify): _____

B. IN COMPLIANCE?

- ☒ 1. YES ☐ 2. NO ☐ 3. UNKNOWN

4. WITH RESPECT TO (list regulation name & number): _____

VIII. PAST REGULATORY ACTIONS

- ☒ A. NONE ☐ B. YES (summarize below)

IX. INSPECTION ACTIVITY (past or on-going)

- ☐ A. NONE ☒ B. YES (complete items 1, 2, 3, & 4 below)

| 1. TYPE OF ACTIVITY | 2. DATE OF PAST ACTION (mo., day, & yr.) | 3. PERFORMED BY: (EPA/State) | 4. DESCRIPTION |
|---------------------|--|------------------------------|--|
| Inspection | 1-15-80 | State | A few low spots in cover on old part of fill and leachate breaking out at one point. |
| | | | |
| | | | |

X. REMEDIAL ACTIVITY (past or on-going)

- ☐ A. NONE ☐ B. YES (complete items 1, 2, 3, & 4 below)

| 1. TYPE OF ACTIVITY | 2. DATE OF PAST ACTION (mo., day, & yr.) | 3. PERFORMED BY: (EPA/State) | 4. DESCRIPTION |
|---------------------|--|------------------------------|----------------|
| | | | |
| | | | |
| | | | |

NOTE: Based on the information in Sections III through X, fill out the Preliminary Assessment (Section II) information on the first page of this form.

3
ENVIRONMENTAL PROTECTION AGENCY
NOTIS DATA MANAGEMENT SYSTEM

NOTIS REPORT #4

LISTING BY FACILITY
REGION: 04 STATE: KY

PAGE: 80
REPORT DATE: 11/06/81

| NOTIFICATION ID NO. | SITE NAME SITE STREET SITE CITY SITE COUNTY EPA SITE ID NO. | REQUIRED NOTIFIER NAME REQUIRED NOTIFIER STREET REQUIRED NOTIFIER CITY (CONTACT NAME/TITLE) (CONTACT PHONE) | STATE | ZIP | NOTIFIER STATUS (PRES OWN, PAST OWN, PRES OP, PAST OP TRANSPORTER, VOLUNTEER) |
|------------------------|---|---|-------|-----|---|
|------------------------|---|---|-------|-----|---|

| | | | | | |
|--------------|----------------------------------|-----------------------------|----|-------|--|
| KYS000001196 | MOBILE ASIE CONTROLS OF KENTUCKY | HARSHAW CHEMICAL CO | | | |
| | 1901 OUTER LOOP | 3400 BANK ST | | | |
| | LOUISVILLE | LOUISVILLE | KY | 40212 | |
| | | (JUHASZ, PAUL J., DIR/MFG) | | | |
| KYD990557078 | | (502-778-7331) | | | |

RELEASES TO THE ENVIRONMENT:

DATES OF WASTE HANDLING: 1963 TO 1981

WASTE AMOUNT: 415,000 GALLONS AREA: 0 MAP PRESENT: NO FORM TYPE: ECKHARDT

NOTIF. POSTMARKED DATE: 81/06/09 SIGNATURE PRESENT: YES DATE OF LAST UPDATE: 81/10/14

TYPE OF FACILITY

TYPES OF WASTES

SOURCES OF WASTE

LANDFILL

ORGANICS
INORGANICS
HEAVY METALS

COMMENTS

SEQ NO.

SEE FILE

1

ENVIRONMENTAL PROTECTION AGENCY
NOTIS DATA MANAGEMENT SYSTEM

NOTIS REPORT #

LISTING BY FACILITY
REGION: 04 STATE: KY

PAGE: 85
REPORT DATE: 11/06/81

3B
NOTIFICATION SITE NAME
SITE STREET
SITE CITY
SITE COUNTY
EPA SITE ID NO.
REQUIRED NOTIFIER NAME
REQUIRED NOTIFIER STREET
REQUIRED NOTIFIER CITY
(CONTACT NAME/TITLE)
(CONTACT PHONE)
STATE ZIP
NOTIFIER STATUS
(PRES OP, PAST OP)
PRES OP, PAST OP
TRANSPORTER,
VOLUNTEER)

KYS000001111 NORTHERN KENTUCKY SANITATION CO FORMICA CORP
OFF OF 1-75 10155 READING RD
VALLEY 41094 OH 45241
KY0960557193 (ROHDE, HARRY O., PLANT MGR)
(513-786-3400)

REFUSES TO THE ENVIRONMENT:

DATES OF WASTE HANDLING: 1971 TO 1975

WASTE AMOUNT: 25 HUN TONS AREA: 0 NAP PRESENT: NO FORM TYPE: ECKHARDT

NOTIF. POSTMARKED DATE: 81/06/09 SIGNATURE PRESENT: YES DATE OF LAST UPDATE: 81/10/14

TYPE OF FACILITY TYPES OF WASTES SOURCES OF WASTE

LANDFILL ORGANICS

COMMENTS SEQ NO.

SEE FILE

1

ENVIRONMENTAL PROTECTION AGENCY
NOTIS DATA MANAGEMENT SYSTEM

NOTIS REPORT #4

3A

LISTING BY FACILITY
REGION: 04 STATE: KY

PAGE: 79
REPORT DATE: 11/06/81

| NOTIFICATION ID NO. | SITE NAME SITE STREET SITE CITY SITE COUNTY EPA SITE ID NO. | REQUIRED NOTIFIER NAME REQUIRED NOTIFIER STREET REQUIRED NOTIFIER CITY (CONTACT NAME/TITLE) (CONTACT PHONE) | NOTIFIER STATUS (PRES OWN, PAST OWN) PRES OP, PAST OP TRANSPORTER, VOLUNTEER) |
|------------------------|---|---|---|
|------------------------|---|---|---|

| | | | |
|--------------|---|--|----------|
| KYS000001040 | MOBILE WASTE CONTROLS OF KENTUCKY 4301 PRODUCE RD LEWISVILLE JEFFERSON KYP054999826 | REYNOLDS METALS CO 6601 WEST BROAD ST RICHMOND (BENT, CHARLES, STAFF ENV ENGR) (804-281-2918) | PRES OWN |
|--------------|---|--|----------|

RELEASES TO THE ENVIRONMENT: NONE

DATES OF WASTE HANDLING: 1967 TO 1980

WASTE AMOUNT: 0 AREA: 0 MAP PRESENT: NO FORM TYPE: 8900-1

NOTIF. POSTMARKED DATE: 81/06/09 SIGNATURE PRESENT: YES DATE OF LAST UPDATE: 81/10/14

TYPE OF FACILITY

TYPES OF WASTES

SOURCES OF WASTE

OTHER-(SEE COMMENTS) OTHER

OTHER-(SEE COMMENTS)

COMMENTS

SEQ NO.

| | |
|--------------------------|-----|
| OILY STILL BOTTOM SLUDGE | 300 |
| EXTRUSION OF ALUMINUM | 400 |
| UNKNOWN | 600 |

ENVIRONMENTAL PROTECTION AGENCY
NOTIS DATA MANAGEMENT SYSTEM

NOTIS REPORT #4

LISTING BY FACILITY
REGION: 04 STATE: KY

PAGE: 100
REPORT DATE: 11/06/81

| NOTIFICATION ID NO. | SITE NAME SITE STREET SITE CITY SITE COUNTY EPA SITE ID NO. | REQUIRED NOTIFIER NAME REQUIRED NOTIFIER STREET REQUIRED NOTIFIER CITY (CONTACT NAME/TITLE) (CONTACT PHONE) | STATE | ZIP | NOTIFIER STATUS (PRES OWN, PAST OWN) PRES OP, PAST OP TRANSPORTER, VOLUNTEER) |
|------------------------|---|---|-------|-----|---|
|------------------------|---|---|-------|-----|---|

| | | | | | |
|--------------|--|--|----|-------|--|
| KYS000001105 | SCA OF KENTUCKY 1901 OUTER LOOP LOUISVILLE | GAMBLE BROTHERS 4601 ALDMOND AVE LOUISVILLE (DURST, S.H.) (502-366-0341) | KY | 40214 | |
| | KY00068347632 | | | | |

RELEASES TO THE ENVIRONMENT: NONE

DATES OF WASTE HANDLING: 1972 TO 1981

WASTE AMOUNT: 8 CU FT AREA: 0 MAP PRESENT: NO FORM TYPE: 8900-1

NOTIF. POSTMARKED DATE: 81/06/09 SIGNATURE PRESENT: YES DATE OF LAST UPDATE: 81/10/14

| TYPE OF FACILITY | TYPES OF WASTES | SOURCES OF WASTE |
|------------------|-----------------|----------------------|
| LANDFILL | ORGANICS | OTHER-(SEE COMMENTS) |

COMMENTS SEQ NO.

WOOD PRODUCTS 400

ENVIRONMENTAL PROTECTION AGENCY
NOTIS DATA MANAGEMENT SYSTEM

NOTIS REPORT #1

LISTING BY FACILITY
REGION: 04 STATE: KY

PAGE: 100
REPORT DATE: 11/06/81

| NOTIFICATION ID NO. | SITE NAME SITE STREET SITE CITY SITE COUNTY EPA SITE ID NO. | REQUIRED NOTIFIER NAME REQUIRED NOTIFIER STREET REQUIRED NOTIFIER CITY (CONTACT NAME/TITLE) (CONTACT PHONE) | STATE | ZIP | NOTIFIER STATUS (PRES OWN, PAST OWN, PRES OP, PAST OP TRANSPORTER, VOLUNTEER) |
|------------------------|---|---|-------|-----|---|
|------------------------|---|---|-------|-----|---|

| | | | | | |
|--------------|--|---|----|-------|--|
| KYS000001105 | SCA OF KENTUCKY 1001 OUTER LOOP LOUISVILLE | GAMBLE BROTHERS 4601 ALLMOND AVE LOUISVILLE (DURST, S.H. (502-366-0341) | KY | 40214 | |
| KY0068347632 | | | | | |

RELEASES TO THE ENVIRONMENT: NONE

DATES OF WASTE HANDLING: 1972 TO 1981

WASTE AMOUNT: 8 CU FT AREA: 0 MAP PRESENT: NO FORM TYPE: 4900-1

NOTIF. POSTMARKED DATE: 81/06/09 SIGNATURE PRESENT: YES DATE OF LAST UPDATE: 81/10/14

| TYPE OF FACILITY | TYPES OF WASTES | SOURCES OF WASTE |
|------------------|-----------------|----------------------|
| LANDFILL | ORGANICS | OTHER=(SEE COMMENTS) |

| COMMENTS | SEQ NO. |
|---------------|---------|
| WOOD PRODUCTS | 400 |

DAVID PRIDDY 11/01
waste sent to SCA LANDFILL PRIOR TO RCR
MOSTLY GLUE & solvents - 1-6-82

NO

12

3

ENVIRONMENTAL PROTECTION AGENCY
NOTIS DATA MANAGEMENT SYSTEM

NOTIS REPORT #4

LISTING BY FACILITY
REGION: 04 STATE: KYPAGE: 80
REPORT DATE: 11/06/81

| NOTIFICATION ID NO. | SITE NAME SITE STREET SITE CITY SITE COUNTY EPA SITE ID NO. | REQUIRED NOTIFIER NAME REQUIRED NOTIFIER STREET REQUIRED NOTIFIER CITY (CONTACT NAME/TITLE) (CONTACT PHONE) | STATE | ZIP | NOTIFIER STATUS (PRES OWN, PAST OWN PRES OP, PAST OP TRANSPORTER, VOLUNTEER) |
|------------------------|---|---|-------|-----|--|
|------------------------|---|---|-------|-----|--|

| | | | | | |
|--------------|--|--|----|-------|--|
| KY0000001196 | LOMBIE BASIE CONTROLS OF KENTUCKY 1901 OUTER LOOP LOUISVILLE | HARSHAW CHEMICAL CO 3400 BANK ST LOUISVILLE (JUHASZ, PAUL J., DIR/MFG) (502-778-7331) | KY | 40212 | |
| KY0980557078 | | | | | |

RELEASES TO THE ENVIRONMENT:

DATES OF WASTE HANDLING: 1963 TO 1981

WASTE AMOUNT: 415,000 GALLONS AREA: 0 MAP PRESENT: NO FORM TYPE: ECKHARDT

NOTIF. POSTMARKED DATE: 81/06/09 SIGNATURE PRESENT: YES DATE OF LAST UPDATE: 81/10/14

TYPE OF FACILITY

TYPES OF WASTES

SOURCES OF WASTE

LANDFILL

ORGANICS
INORGANICS
HEAVY METALS

COMMENTS

SEQ NO.

SEE FILE

1

12

TELEPHONE/CONVERSATION SUMMARY
Ecology & Environment, Inc.
Region IV-Atlanta

DATE _____ TIME _____

NAME Jack Younger POSITION _____

COMPANY _____

ADDRESS _____

PHONE # _____

E&E PERSONNEL _____

DISCUSSION

SCA of Kentucky is your trash co.
Call back to morrow morning

3A

NOTIS REPORT SUSPECTED **** LAND FILL, DRUMS BELOW GROUND NOTIS SITE ANALYSIS-NOTIFICATIONS PAGE 30 REPORT DATE 81/11/25

NOTIS ID NO. KY5000001061 EPA SITE ID NO... KYD980557078 SITE COUNTY...

SITE NAME... OUTER LOOP LANDFILL (Mobile Waste Control) NOTIFIER NAME... SCA SERVICES

SITE STR.... 1901 OUTER LOOP NOTIFIER STR.... 60 STATE ST

SITE CITY... LOUISVILLE ST KY ZIP 40219 NOTIFIER CITY... BOSTON ST MA ZIP 02109

CONTACT NAME/TITLE... DUNLAP, PETER, DIR, ENV ASSUR CONTACT PHONE... 6173678300

Robert Settlemyer VP Central Div Solid Waste
419 422-0364

REQUIRED NOTIFIER STATUS

PRES OWN PAST OWN PRES OPR PAST OPR VOLUNTEER TRANSPORTER

Findley,
Ohio

X

FORM TYPE DATES OF WASTE HANDLING RELEASES TO THE ENVIRONMENT KNOWN SUSPECTED LIKELY NONE MAP SIGNATURE PRESENT

P900-1 X YES

TYPE OF FACILITY

| FILES | LAND TREATMENT | LAND FILL TANKS | IMPOUNDMENT | UNDERGROUND | | DRUMS, DRUMS, OTHER | |
|-------|----------------|-----------------|-------------|-------------|--------|---------------------|--------------|
| | | | | INJECTION | GROUND | ABOVE GROUND | BELOW GROUND |
| | | | | | | | |

X

Call to verify that this landfill is Mobile Waste Control (#12)
Types of Wastes not given

(19)

3A

NOTIS REPORT

NOTIS SITE ANALYSIS-NOTIFICATIONS

PAGE 30

SUSPECTED *** LAND FILL, DRUMS BELOW GROUND

REPORT DATE 81/11/25

NOTIS ID NO, KY9000001061

EPA SITE ID NO, KYD980557078

SITE COUNTY,...

SITE NAME... OUTER LOOP LANDFILL (Mobile Waste Control)

NOTIFIER NAME... SCA SERVICES

SITE STR... 1901 OUTER LOOP

NOTIFIER STR... 60 STATE ST

SITE CITY... LOUISVILLE

ST KY ZIP 40219

NOTIFIER CITY... BOSTON

ST MA ZIP 02109

CONTACT NAME/TITLE... DUNLAP, PETER, DIR, ENV ASSUR

CONTACT PHONE... 6173678300

REQUIRED NOTIFIER STATUS

PRES OWN PAST OWN PRES OPR PAST OPR VOLUNTEER TRANSPORTER

X

FORM
TYPE

DATES OF
WASTE HANDLING

RELEASES TO THE ENVIRONMENT
KNOWN SUSPECTED LIKELY NONE

MAP

SIGNATURE
PRESENT

R900-1

X

YES

TYPE OF FACILITY

| FILES | TREAT MENT | LAND FILL | TANKS | IMPOUND MENT | UNDER- GROUND | | | | DRUMS, DRUMS, OTHER, | | |
|-------|---------------|--------------|-------|-----------------|---------------|--------|--------|--------|----------------------|-------|-----|
| | | | | | INJECTION | GROUND | GROUND | FOLDER | ABOVE | BELOW | SFE |
| | | | | | | | | | | | |

X

Call to verify that this landfill is Mobile Waste Control
Types of Wastes not given

TELEPHONE/CONVERSATION SUMMARY
Ecology & Environment, Inc.
Region IV-Atlanta

DATE 2/4 TIME _____
NAME SCA Services POSITION Env. Assurance
COMPANY Peter Dunlap
ADDRESS Boston MA
PHONE # 617 367-8300
E&E PERSONNEL Chuck Lee

DISCUSSION

Mr. Dunlap will not be in until Monday.
I was referred to Mr. Robert Settlemeier, the
Vice President of the Central Division (Louisville)
at 419 422-0364. Unfortunately, Mr. Settlemeier
will not be in until Monday, and no one
else can help us but these
two.

EPA Notification of Hazardous Waste Site

United States
Environmental Protection
Agency
Washington DC 20460

This initial notification information is required by Section 103(c) of the Comprehensive Environmental Response, Compensation, and Liability Act of 1980 and must be mailed by June 9, 1981.

Please type or print in ink, if you need additional space, use separate sheets of paper. Indicate the letter of the item which applies.

810609

KY5000001105

A Person Required to Notify:

Enter the name and address of the person or organization required to notify.

Name GAMBLE BROTHERS
Street 4601 ALMOND AVE
City LOUISVILLE State KY Zip Code 40214

B Site Location:

Enter the common name (if known) and actual location of the site.

Name of Site S. C. J. 121
Street 1901 Outer Loop
City Louisville County Jefferson State KY Zip Code 40221

C Person to Contact:

Enter the name, title (if applicable), and business telephone number of the person to contact regarding information submitted on this form.

Name (Last, First and Title) DURST, S.H.
Phone 502-366-0341

D Dates of Waste Handling:

Enter the years that you estimate waste treatment, storage, or disposal began and ended at the site.

From (Year) 1972 To (Year) PRESENT

E Waste Type: Choose the option you prefer to complete

Option 1: Select general waste types and source categories. If you do not know the general waste types or sources, you are encouraged to describe the site in Item I—Description of Site.

General Type of Waste:
Place an X in the appropriate boxes. The categories listed overlap. Check each applicable category.

- 1. ☒ Organics
- 2. ☐ Inorganics
- 3. ☐ Solvents
- 4. ☐ Pesticides
- 5. ☐ Heavy metals
- 6. ☐ Acids
- 7. ☐ Bases
- 8. ☐ PCBs
- 9. ☐ Mixed Municipal Waste
- 10. ☐ Unknown
- 11. ☐ Other (Specify)

Source of Waste:
Place an X in the appropriate boxes.

- 1. ☐ Mining
- 2. ☐ Construction
- 3. ☐ Textiles
- 4. ☐ Fertilizer
- 5. ☐ Paper/Printing
- 6. ☐ Leather Tanning
- 7. ☐ Iron/Steel Foundry
- 8. ☐ Chemical, General
- 9. ☐ Plating/Polishing
- 10. ☐ Military/Ammunition
- 11. ☐ Electrical Conductors
- 12. ☐ Transformers
- 13. ☐ Utility Companies
- 14. ☐ Sanitary Refuse
- 15. ☐ Photofinish
- 16. ☐ Lab Hospital
- 17. ☐ Unknown
- 18. ☒ Other (Specify)

WOOD
PRODUCTS

Option 2: This option is available to persons familiar with the Resource Conservation and Recovery Act (RCRA) Section 3001 regulations (40 CFR Part 261).

Specific Type of Waste:
EPA has assigned a four-digit number to each hazardous waste listed in the regulations under Section 3001 of RCRA. Enter the appropriate four-digit number in the boxes provided. A copy of the list of hazardous wastes and codes can be obtained by contacting the EPA Region serving the State in which the site is located.

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Notification of Hazardous Waste Site

Side Two

F Waste Quantity

Place an X in the appropriate boxes to indicate the facility types found at the site

In the "total facility waste amount" space give the estimated combined quantity (volume) of hazardous wastes at the site using cubic feet or gallons.

In the "total facility area" space, give the estimated area size which the facilities occupy using square feet or acres.

Facility Type

1. ☐ Piles
2. ☐ Land Treatment
3. ☒ Landfill
4. ☐ Tanks
5. ☐ Impoundment
6. ☐ Underground Injection
7. ☐ Drums, Above Ground
8. ☐ Drums, Below Ground
9. ☐ Other (Specify) _____

Total Facility Waste Amount

cubic feet

> 7.4

gallons

Total Facility Area

square feet

acres

G Known, Suspected or Likely Releases to the Environment:

Place an X in the appropriate boxes to indicate any known, suspected, or likely releases of wastes to the environment.

☐ Known ☐ Suspected ☐ Likely ☒ None

Note: Items Hand I are optional. Completing these items will assist EPA and State and local governments in locating and assessing hazardous waste sites. Although completing the items is not required, you are encouraged to do so.

H Sketch Map of Site Location: (Optional)

Sketch a map showing streets, highways, routes or other prominent landmarks near the site. Place an X on the map to indicate the site location. Draw an arrow showing the direction north. You may substitute a publishing map showing the site location.

I Description of Site: (Optional)

Describe the history and present conditions of the site. Give directions to the site and describe any nearby wells, springs, lakes, or housing. Include such information as how waste was disposed and where the waste came from. Provide any other information or comments which may help describe the site conditions.

J Signature and Title:

The person or authorized representative (such as plant managers, superintendents, trustees or attorneys) of persons required to notify must sign the form and provide a mailing address (if different than address in item A). For other persons providing notification, the signature is optional. Check the boxes which best describe the relationship to the site of the person required to notify. If you are not required to notify check "Other".

Name

LECIL M. COLBURN

Street

P.O. Box 22601

City

TAMPA

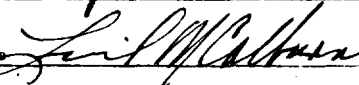
State

FL

Zip Code

33622

Signature



Date

6/8/81

☐ Owner, Present☐ Owner, Past☐ Transporter☐ Operator, Present☐ Operator, Past☒ Other

EPA Notification of Hazardous Waste Site

United States
Environmental Protection
Agency
Washington DC 20460

This initial notification information is required by Section 103(c) of the Comprehensive Environmental Response, Compensation, and Liability Act of 1980 and must be mailed by June 9, 1981.

Please type or print in ink. If you need additional space, use separate sheets of paper. Indicate the letter of the item which applies.

810609

KYS000001106

A Person Required to Notify:

Enter the name and address of the person or organization required to notify.

Name Harshaw Chemical Co.
Street 3400 Bank St
City Louisville State KY Zip Code 40212

B Site Location:

Enter the common name (if known) and actual location of the site.

Name of Site Mobile Waste Controls of KY
Street 1901 Outer Loop
City Louisville County State KY Zip Code 40219

KYD 980557078

C Person to Contact:

Enter the name, title (if applicable), and business telephone number of the person to contact regarding information submitted on this form.

Name (Last, First and Title) Juhasz, Paul J. Dir IMfg
Phone 502-778-7331

D Dates of Waste Handling:

Enter the years that you estimate waste treatment, storage, or disposal began and ended at the site.

From (Year) 1963 To (Year) 1981

E Waste Type: Choose the option you prefer to complete

Option 1: Select general waste types and source categories. If you do not know the general waste types or sources, you are encouraged to describe the site in Item I—Description of Site.

General Type of Waste:

Place an X in the appropriate boxes. The categories listed overlap. Check each applicable category.

1. ☒ Organics
2. ☒ Inorganics
3. ☐ Solvents
4. ☐ Pesticides
5. ☒ Heavy metals
6. ☐ Acids
7. ☐ Bases
8. ☐ PCBs
9. ☐ Mixed Municipal Waste
10. ☐ Unknown
11. ☐ Other (Specify)

Source of Waste:

Place an X in the appropriate boxes.

1. ☐ Mining
2. ☐ Construction
3. ☐ Textiles
4. ☐ Fertilizer
5. ☐ Paper/Printing
6. ☐ Leather Tanning
7. ☐ Iron/Steel Foundry
8. ☐ Chemical, General
9. ☐ Plating/Polishing
10. ☐ Military/Ammunition
11. ☐ Electrical Conductors
12. ☐ Transformers
13. ☐ Utility Companies
14. ☐ Sanitary/Refuse
15. ☐ Photofinish
16. ☐ Lab/Hospital
17. ☐ Unknown
18. ☐ Other (Specify)

Option 2: This option is available to persons familiar with the Resource Conservation and Recovery Act (RCRA) Section 3001 regulations (40 CFR Part 261).

Specific Type of Waste:

EPA has assigned a four-digit number to each hazardous waste listed in the regulations under Section 3001 of RCRA. Enter the appropriate four-digit number in the boxes provided. A copy of the list of hazardous wastes and codes can be obtained by contacting the EPA Region serving the State in which the site is located.

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JUN 5 11 57 AM '81
DIVISION

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000062

Notification of Hazardous Waste Site**Side Two****F Waste Quantity:**

Place an X in the appropriate boxes to indicate the facility types found at the site.

In the "total facility waste amount" space give the estimated combined quantity (volume) of hazardous wastes at the site using cubic feet or gallons.

In the "total facility area" space, give the estimated area size which the facilities occupy using square feet or acres.

Facility Type

1. ☐ Piles
2. ☐ Land Treatment
3. ☒ Landfill
4. ☐ Tanks
5. ☐ Impoundment
6. ☐ Underground Injection
7. ☐ Drums, Above Ground
8. ☐ Drums, Below Ground
9. ☐ Other (Specify) _____

Total Facility Waste Amount

cubic feet _____

gallons 415,000**Total Facility Area**

square feet _____

acres _____

G Known, Suspected or Likely Releases to the Environment:

Place an X in the appropriate boxes to indicate any known, suspected, or likely releases of wastes to the environment.

☐ Known ☐ Suspected ☐ Likely ☐ None

Note: Items H and I are optional. Completing these items will assist EPA and State and local governments in locating and assessing hazardous waste sites. Although completing the items is not required, you are encouraged to do so.

H Sketch Map of Site Location: (Optional)

Sketch a map showing streets, highways, routes or other prominent landmarks near the site. Place an X on the map to indicate the site location. Draw an arrow showing the direction north. You may substitute a publishing map showing the site location.

I Description of Site: (Optional)

Describe the history and present conditions of the site. Give directions to the site and describe any nearby wells, springs, lakes, or housing. Include such information as how waste was disposed and where the waste came from. Provide any other information or comments which may help describe the site conditions.

J Signature and Title:

The person or authorized representative (such as plant managers, superintendents, trustees or attorneys) of persons required to notify must sign the form and provide a mailing address (if different than address in item A). For other persons providing notification, the signature is optional. Check the boxes which best describe the relationship to the site of the person required to notify. If you are not required

Name _____

Street _____

City _____

State _____

Zip Code _____

Signature _____

Date _____

- ☐ Owner, Present
- ☐ Owner, Past
- ☐ Transporter
- ☐ Operator, Present
- ☐ Operator, Past
- ☐ Other

COMPLETE THIS FORM FOR EVERY SITE (INCLUDING THE LOCATION OF THIS FACILITY AS ONE SITE) USED FOR THE DISPOSAL OF PROCESS WASTES GENERATED BY THIS FACILITY SINCE 1950.

Company Name: Harshaw Chemical Co.- A Div. of Gulf Oil Corp
Facility Name: Louisville Plant
Name of Site: Mobile Waste Controls of KY Inc.
Address of Site: 1901 Outer Loope
no. street .

Louisville, KY
city state zip code

Name of Owner (while used by facility): Mobil Waste Controls of KY., Inc.
Address: 1901 Outerloop
no. street

| | | |
|--------------------|-----------|----------|
| <u>Louisville,</u> | <u>KY</u> | <u></u> |
| city | state | zip code |

Current Owner (if different from above): _____
Address: _____
no. street

| city | state | zip code |
|------|-------|----------|
|------|-------|----------|

- | | | |
|---|----|---------|
| 1. Location (1= the property on which facility is located; 2= off-site)..... | 2 | (10) |
| 2. Ownership at time of use (1= company ownership; 2=private but not company ownership) 3=public ownership) | 2 | (11) |
| 3. Current status (1= closed; 2= still in use; 9=don't know) | 2 | (12) |
| IF CLOSED, specify year closed | 19 | (13-14) |
| 4. Year first used for process waste from this facility | 19 | (15-16) |
| 5. Year last used for process waste from this facility (enter "79" if still in use) | 19 | (17-18) |
| 6. Total amount of process waste from this facility disposed at site: | | |
| thousand gallons | 4 | (19-26) |
| hundred tons | 1 | (27-33) |
| thousand cubic yards | 0 | (34-41) |
| 7. Specify type(s) of disposal method(s) used at site and whether method is still in use (1=currently in use; 2=no longer in use; 3=never used; 9=don't know) | | |
| landfill, mono industrial waste | 9 | (42) |
| landfill, mixed industrial waste | 1 | (43) |
| landfill, drummed waste | 9 | (44) |
| landfill, municipal refuse co-disposed ... | 9 | (45) |
| pits/ponds/lagoons | 9 | (46) |
| deep well injection | 9 | (47) |
| land farming | 9 | (48) |
| incineration | 9 | (49) |
| treatment (eg. neutralizing)..... | 9 | (50) |
| reprocessing/recycling | 9 | (51) |
| other (specify)..... | 9 | (52) |
| 8. Users of this site (1=this facility; 2=this facility and other company facilities only; 3=this company and others; 9=don't know) | 3 | (53) |

LIST NAMES AND ADDRESSES OF OTHER KNOWN USERS BELOW

Facility Name: Louisville, KY Plant

Site Name: Mobile Waste Controls of KY

9. Components (or characteristics) of process waste from this facility disposed at site: (1=present in waste; 2=not present in waste; 9=don't know)

FILL IN EVERY BLOCK SPACE

| | | |
|--|---|------|
| Acid solutions, with pH < 3..... | 2 | (10) |
| pickling liquor | 2 | (11) |
| metal plating waste | 2 | (12) |
| circuit etchings | 2 | (13) |
| inorganic acid manufacture | 2 | (14) |
| organic acid manufacture | 2 | (15) |
| Base solutions, with pH > 10 | 2 | (16) |
| caustic soda manufacture | 2 | (17) |
| nylon and similar polymer generation | 2 | (18) |
| scrubber residual | 2 | (19) |
| Heavy metals & trace metals (bonded organically & inorganically) | 1 | (20) |
| arsenic, selenium, antimony | 1 | (21) |
| mercury | 2 | (22) |
| iron, manganese, magnesium | 1 | (23) |
| zinc, cadmium, copper, chromium (trivalent) | 1 | (24) |
| chromium (hexavalent) | 1 | (25) |
| lead | 1 | (26) |
| Radioactive residues, > 3 pico curies/liter | 2 | (27) |
| uranium residuals & residuals for UF ₆ recycling | 2 | (28) |
| lanthanide series elements and rare earth salts | 2 | (29) |
| phosphate slag | 2 | (30) |
| thorium | 2 | (31) |
| radium | 2 | (32) |
| other alpha, beta & gamma emitters | 2 | (33) |
| Organics..... | 1 | (34) |
| pesticides & intermediates | 2 | (35) |
| herbicides & intermediates | 2 | (36) |
| fungicides & intermediates | 2 | (37) |
| rodenticides & intermediates | 2 | (38) |
| halogenated aliphatics | 2 | (39) |
| halogenated aromatics | 2 | (40) |
| acrylates & latex emulsions | 2 | (41) |
| PCB/PBB's | 2 | (42) |
| amides, amines, imides | 1 | (43) |
| plastizers | 2 | (44) |
| resins | 1 | (45) |
| elastomers | 2 | (46) |
| solvents polar (except water) | 2 | (47) |
| carbontetrachloride | 2 | (48) |
| trichloroethylene | 2 | (49) |
| other solvents nonpolar | 2 | (50) |
| solvents halogenated aliphatic..... | 2 | (51) |
| solvents halogenated aromatic | 2 | (52) |
| oils and oil sludges | 2 | (53) |
| esters and ethers | 2 | (54) |
| alcohols | 2 | (55) |
| ketones & aldehydes | 2 | (56) |
| dioxins | 2 | (57) |
| Inorganics | 1 | (58) |
| salts | 1 | (59) |
| mercaptans | 2 | (60) |
| Misc..... | 1 | (61) |
| pharmaceutical wastes | 2 | (62) |
| paints & pigments | 1 | (63) |
| catalysts (eg. vanadium, platinum, palladium) | 2 | (64) |
| asbestos | 2 | (65) |
| shock sensitive wastes (eg. nitrated toluenes) | 2 | (66) |
| air water reactive wastes (eg. P ₄ , aluminum chloride) | 2 | (67) |
| wastes with flash point below 100° F..... | 2 | (68) |

PROVIDE A COMPLETE LIST OF ALL FIRMS AND INDEPENDENT CONTRACTORS, INCLUDING THE COMPANY AND ITS AFFILIATES AND SUBSIDIARIES, USED TO REMOVE PROCESS WASTES FROM THIS FACILITY SINCE 1950.

Company Name: The Harshaw Chemical Co.- A Div. of Gulf Oil Corp.

Facility Name: Louisville Plant

| <u>Name of Firm or Contractor</u> | <u>Address</u> | <u>ICC # (If Known)</u> | <u>Years Used</u> |
|--|----------------------------------|-----------------------------|-------------------|
| Harshaw Chemical Co. | 600 N. 34th Street | | 1950 - 1963 |
| Mobile Waste Controls of Kentucky, Inc. | 1901 Outerloop Louisville, KY | | 1963 - 1979 |

EPA Notification of Hazardous Waste Site

United States
Environmental Protection
Agency
Washington DC 20460

This initial notification information is required by Section 103(c) of the Comprehensive Environmental Response, Compensation, and Liability Act of 1980 and must be mailed by June 9, 1981.

Please type or print in ink. If you need additional space, use separate sheets of paper. Indicate the letter of the item which applies.

810609

KYS.000001061

A Person Required to Notify:

Enter the name and address of the person or organization required to notify.

Name SCA Services, Inc. *
Street 60 State Street
City Boston State MA Zip Code 02109

B Site Location:

Enter the common name (if known) and actual location of the site.

Name of Site Outer Loop Landfill
Street 90
City Louisville County State KY Zip Code

C Person to Contact:

Enter the name, title (if applicable), and business telephone number of the person to contact regarding information submitted on this form.

Name (Last, First and Title) Dunlap, Peter, Director, Environmental
Phone 617 - 367-8300 extension 207/ Assurance

D Dates of Waste Handling:

Enter the years that you estimate waste treatment, storage, or disposal began and ended at the site.

From (Year) Unknown To (Year) Unknown

E Waste Type: Choose the option you prefer to complete

Option 1: Select general waste types and source categories. If you do not know the general waste types or sources, you are encouraged to describe the site in item I—Description of Site.

General Type of Waste:
Place an X in the appropriate boxes. The categories listed overlap. Check each applicable category.

- 1. ☐ Organics
- 2. ☐ Inorganics
- 3. ☐ Solvents
- 4. ☐ Pesticides
- 5. ☐ Heavy metals
- 6. ☐ Acids
- 7. ☐ Bases
- 8. ☐ PCBs
- 9. ☐ Mixed Municipal Waste
- 10. ☐ Unknown
- 11. ☐ Other (Specify)

Source of Waste:
Place an X in the appropriate boxes.

- 1. ☐ Mining
- 2. ☐ Construction
- 3. ☐ Textiles
- 4. ☐ Fertilizer
- 5. ☐ Paper/Printing
- 6. ☐ Leather Tanning
- 7. ☐ Iron/Steel Foundry
- 8. ☐ Chemical, General
- 9. ☐ Plating/Polishing
- 10. ☐ Military/Ammunition
- 11. ☐ Electrical Conductors
- 12. ☐ Transformers
- 13. ☐ Utility Companies
- 14. ☐ Sanitary/Refuse
- 15. ☐ Photofinish
- 16. ☐ Lab/Hospital
- 17. ☐ Unknown
- 18. ☐ Other (Specify)

Option 2: This option is available to persons familiar with the Resource Conservation and Recovery Act (RCRA) Section 3001 regulations (40 CFR Part 261).

Specific Type of Waste:
EPA has assigned a four-digit number to each hazardous waste listed in the regulations under Section 3001 of RCRA. Enter the appropriate four-digit number in the boxes provided. A copy of the list of hazardous wastes and codes can be obtained by contacting the EPA Region serving the State in which the site is located.

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See attached information

Form Approved
EPA No. 2000-0138

* SCA Services of Kentucky, Inc. is the record owner of the Site and a wholly owned subsidiary of SCA Services, Inc. This notification is intended to serve as notification by both the parent and the subsidiary.

Notification of Hazardous Waste Site

Side Two

| | | |
|---|--|--|
| F Waste Quantity Place an X in the appropriate boxes to indicate the facility types found at the site. In the "total facility waste amount" space give the estimated combined quantity (volume) of hazardous wastes at the site using cubic feet or gallons. In the "total facility area" space, give the estimated area size which the facilities occupy using square feet or acres. | Facility Type 1. <input type="checkbox"/> Piles 2. <input type="checkbox"/> Land Treatment 3. <input checked="" type="checkbox"/> Landfill 4. <input type="checkbox"/> Tanks 5. <input type="checkbox"/> Impoundment 6. <input type="checkbox"/> Underground Injection 7. <input type="checkbox"/> Drums, Above Ground 8. <input type="checkbox"/> Drums, Below Ground 9. <input type="checkbox"/> Other (Specify) _____ | Total Facility Waste Amount cubic feet <u>Unknown</u> gallons <u>Unknown</u> Total Facility Area square feet _____ acres <u>245</u> |
|---|--|--|

G Known, Suspected or Likely Releases to the Environment:

Place an X in the appropriate boxes to indicate any known, suspected, or likely releases of wastes to the environment.

☐ Known ☒ Suspected ☐ Likely ☐ None

Note: Items H and I are optional. Completing these items will assist EPA and State and local governments in locating and assessing hazardous waste sites. Although completing the items is not required, you are encouraged to do so.

H Sketch Map of Site Location: (Optional)

Sketch a map showing streets, highways, routes or other prominent landmarks near the site. Place an X on the map to indicate the site location. Draw an arrow showing the direction north. You may substitute a publishing map showing the site location.

I Description of Site: (Optional)

Describe the history and present conditions of the site. Give directions to the site and describe any nearby wells, springs, lakes, or housing. Include such information as how waste was disposed and where the waste came from. Provide any other information or comments which may help describe the site conditions.

J Signature and Title:

The person or authorized representative (such as plant managers, superintendents, trustees or attorneys) of persons required to notify must sign the form and provide a mailing address (if different than address in item A). For other persons providing notification, the signature is optional. Check the boxes which best describe the relationship to the site of the person required to notify. If you are not required to notify check "Other".

Name Richard A. Covel, Esq.
 Street 60 State Street
 City Boston State MA Zip Code 02109
 Signature Richard A Covel Date 6/9/81
☒ Owner, Present
☐ Owner, Past
☐ Transporter
☐ Operator, Present
☐ Operator, Past
☐ Other



U.S. ENVIRONMENTAL PROTECTION AGENCY NOTIFICATION OF HAZARDOUS WASTE ACTIVITY

INSTRUCTIONS: If you received label, affix it in the space at left. Information on the label is incorrect through it and supply the correct in the appropriate section below. If complete and correct, leave items below blank. If you did not receive label, complete all items. "Installatic single site where hazardous waste is treated, stored and/or disposed of, portor's principal place of business, to the INSTRUCTIONS FOR FILIA CATION before completing this information requested herein is requ (Section 3010 of the Resource Cons Recovery Act).

| |
|----------------------------------|
| INSTALLATION'S EPA I.D. NO. |
| I. NAME OF INSTALLATION |
| II. INSTALLATION MAILING ADDRESS |
| III. LOCATION OF INSTALLATION |

PLEASE PLACE LABEL IN THIS SPACE

FOR OFFICIAL USE ONLY

COMMENTS

| | | | | | | | | | | | | | | | | | | | | | | | | |
|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|
| | | | | | | | | | | | | | | | | | | | | | | | | |
|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|

| | | | | | | | | | | | | | | | | | | | | | | | | |
|--------------------------------|--|--|--|--|--|--|--|--|--|-------------|--|--|--|--|---------------------------------|--|--|--|--|--|--|--|--|--|
| INSTALLATION'S EPA I.D. NUMBER | | | | | | | | | | APPROVED | | | | | DATE RECEIVED (yr., mo., & day) | | | | | | | | | |
| 1 2 3 4 5 6 7 8 9 0 | | | | | | | | | | 1 2 3 4 5 6 | | | | | 1 2 3 4 5 6 7 8 9 0 | | | | | | | | | |

I. NAME OF INSTALLATION

| | | | | | | | | | | | | | | | | | | | | | | | | |
|-----------------------------------|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|
| O U T E R L O O P L A N D F I L L | | | | | | | | | | | | | | | | | | | | | | | | |
|-----------------------------------|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|

II. INSTALLATION MAILING ADDRESS

| | | | | | | | | | | | | | | | | | | | | | | | | |
|---|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|-----|--|-----------|--|--|
| STREET OR P.O. BOX | | | | | | | | | | | | | | | | | | | | | | | | |
| 3 3 5 F l o o r 6 0 S t a t e S t r e e t | | | | | | | | | | | | | | | | | | | | | | | | |
| CITY OR TOWN | | | | | | | | | | | | | | | | | | | | ST. | | ZIP CODE | | |
| 4 B o s t o n | | | | | | | | | | | | | | | | | | | | M a | | 0 2 1 0 9 | | |

III. LOCATION OF INSTALLATION

| | | | | | | | | | | | | | | | | | | | | | | | | |
|-----------------------------|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|-----|--|-----------|--|--|
| STREET OR ROUTE NUMBER | | | | | | | | | | | | | | | | | | | | | | | | |
| 5 1 9 0 1 O U T E R L O O P | | | | | | | | | | | | | | | | | | | | | | | | |
| CITY OR TOWN | | | | | | | | | | | | | | | | | | | | ST. | | ZIP CODE | | |
| 6 L O U I S V I L L E | | | | | | | | | | | | | | | | | | | | K Y | | 4 0 2 2 1 | | |

IV. INSTALLATION CONTACT

| | | | | | | | | | | | | | | | | | | | | | | | | |
|---|--|--|--|--|--|--|--|--|--|--|--|--|--|--|-----------------------------|--|--|--|--|--|--|--|--|--|
| NAME AND TITLE (last, first, & job title) | | | | | | | | | | | | | | | PHONE NO. (area code & no.) | | | | | | | | | |
| 2 D u n l a p P e t e r - D i r . T e c h S e r v | | | | | | | | | | | | | | | 6 1 7 - 3 6 7 - 8 3 0 0 | | | | | | | | | |

V. OWNERSHIP

| | | | | | | | | | | | | | | | | | | | | | | | | |
|---|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|
| A. NAME OF INSTALLATION'S LEGAL OWNER | | | | | | | | | | | | | | | | | | | | | | | | |
| 8 S C A S E R V I C E S O F K E N T U C K Y I N C | | | | | | | | | | | | | | | | | | | | | | | | |

| | | | | | | | | | | | | | | | | | | | | | | | | |
|---|--|--|--|--|--|--|--|--|--|---|--|--|--|--|--|--|--|--|--|--|--|--|--|--|
| VI. TYPE OF OWNERSHIP (enter the appropriate letter into box) | | | | | | | | | | VI. TYPE OF HAZARDOUS WASTE ACTIVITY (enter "X" in the appropriate box(es)) | | | | | | | | | | | | | | |
| F - FEDERAL M - NON-FEDERAL | | | | | | | | | | <input type="checkbox"/> A. GENERATION <input type="checkbox"/> B. TRANSPORTATION (complete item VII) <input checked="" type="checkbox"/> C. TREAT/STORE/DISPOSE <input type="checkbox"/> D. UNDERGROUND INJECTION | | | | | | | | | | | | | | |

VII. MODE OF TRANSPORTATION (transporters only - enter "X" in the appropriate box(es))

| | | | | |
|---------------------------------|----------------------------------|-------------------------------------|-----------------------------------|--|
| <input type="checkbox"/> A. AIR | <input type="checkbox"/> B. RAIL | <input type="checkbox"/> C. HIGHWAY | <input type="checkbox"/> D. WATER | <input type="checkbox"/> E. OTHER (specify): |
|---------------------------------|----------------------------------|-------------------------------------|-----------------------------------|--|

VIII. FIRST OR SUBSEQUENT NOTIFICATION

Mark "X" in the appropriate box to indicate whether this is your installation's first notification of hazardous waste activity or a subsequent notification. If this is not your first notification, enter your installation's EPA I.D. Number in the space provided below.

IX. DESCRIPTION OF HAZARDOUS WASTES (continued from front)

A. HAZARDOUS WASTES FROM NON-SPECIFIC SOURCES. Enter the four-digit number from 40 CFR Part 261.31 for each listed hazardous waste from non-specific sources your installation handles. Use additional sheets if necessary.

| | | | | | |
|---|---|---|----|----|----|
| 1 | 2 | 3 | 4 | 5 | 6 |
| 7 | 8 | 9 | 10 | 11 | 12 |

B. HAZARDOUS WASTES FROM SPECIFIC SOURCES. Enter the four-digit number from 40 CFR Part 261.32 for each listed hazardous waste from specific industrial sources your installation handles. Use additional sheets if necessary.

| | | | | | |
|----|----|----|----|----|----|
| 13 | 14 | 15 | 16 | 17 | 18 |
| 19 | 20 | 21 | 22 | 23 | 24 |
| 25 | 26 | 27 | 28 | 29 | 30 |

C. COMMERCIAL CHEMICAL PRODUCT HAZARDOUS WASTES. Enter the four-digit number from 40 CFR Part 261.33 for each chemical substance your installation handles which may be a hazardous waste. Use additional sheets if necessary.

| | | | | | |
|----|----|----|----|----|----|
| 31 | 32 | 33 | 34 | 35 | 36 |
| 37 | 38 | 39 | 40 | 41 | 42 |
| 43 | 44 | 45 | 46 | 47 | 48 |

D. LISTED INFECTIOUS WASTES. Enter the four-digit number from 40 CFR Part 261.34 for each listed hazardous waste from hospitals, hospitals, medical and research laboratories your installation handles. Use additional sheets if necessary.

| | | | | | |
|----|----|----|----|----|----|
| 49 | 50 | 51 | 52 | 53 | 54 |
|----|----|----|----|----|----|

E. CHARACTERISTICS OF NON-LISTED HAZARDOUS WASTES. Mark "X" in the boxes corresponding to the characteristics of non-listed hazardous wastes your installation handles: (See 40 CFR Parts 261.21 - 261.24.)

☐ 1. INSTANTLY
(D001)


☐ 2. CORROSIVE
(D002)

☐ 3. REACTIVE
(D003)

☐ 4. TOXIC
(D004)

X. CERTIFICATION

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

| | | |
|--|---------------------------------------|-------------|
| SIGNATURE  | NAME & OFFICIAL TITLE (type or print) | DATE SIGNED |
|--|---------------------------------------|-------------|

SCA SERVICES, INC.

60 State Street
Boston, Massachusetts 02109
(617) 367-8300



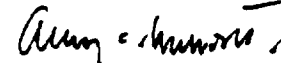
Gentlemen:

Please find attached hereto a notification of hazardous waste activity filed on behalf of Outer Loop Landfill. This site is a sanitary landfill whose primary purpose is the receipt of non-hazardous solid waste for disposal. This site has, however, received from time to time, certain amounts of waste under state or local permits which could be termed "hazardous" under 40 CFR 261 when that regulation becomes effective.

This site will be completely closed to the "treatment, storage or disposal of hazardous waste" (as those terms are defined by Sec 1004 of RCRA) prior to the effective date of the RCRA regulations (November 19, 1980). In concurrence therewith, no permit application will be filed under Sec. 3005 of RCRA, since interim status is not necessary nor sought.

Please note that the attached listing evidences waste which has been received within the last three months which could be considered hazardous. The exact EPA identification number for any of these wastes is unavailable. SCA has, however, initiated contact with the generators of these waste streams so that the appropriate EPA identification number may be discerned.

Very truly yours


Amy C. Burbott
Counsel

SLF SURVEY FORM

NAME OF FACILITY: OUTER LOOP (Louisville) PAGE THREE

TEL.#: 1-502-969-2355

DATED: 8/14/80

PERSON CONTACTED: Robert Lee

POSITION: District Manager

INDUSTRIAL WASTES/MUNICIPAL WASTES BEING RECEIVED (MAY 1 - AUG. 18, 80)

| <u>GENERATOR</u> | <u>WASTE DESCRIPTION</u> | <u>ESTIMATED* VOLUME</u> |
|--------------------------------------|--|------------------------------|
| 1. <u>Louisville Pipe</u> | <u>Solidified grease & rag materials</u> | <u></u> |
| 2. <u>Louisville Tin & Stove</u> | <u>Combined wastes</u> | <u></u> |
| 3. <u>M & T Chemicals</u> | <u>Filter papers</u> | <u></u> |
| 4. <u>"</u> | <u>Packaging materials</u> | <u></u> |
| 5. <u>"</u> | <u>Scrap iron & steel</u> | <u></u> |
| 6. <u>"</u> | <u>Off spec PVC, industrial castings</u> | <u></u> |
| 7. <u>Metro Sewage District</u> | <u>STP sludge</u> | <u></u> |
| 8. <u>Ikolona Sewer</u> | <u>Dry digested sludge</u> | <u></u> |
| 9. <u>Olympic Stain</u> | <u>Stain & paint waste</u> | <u></u> |
| 10. <u>Philadelphia Quartz Co.</u> | <u>Aluminum hydroxide</u> | <u></u> |
| 11. <u>B.F. Goodrich</u> | <u>20 waste types</u> | <u></u> |
| 12. <u></u> | <u></u> | <u></u> |
| 13. <u></u> | <u></u> | <u></u> |
| 14. <u></u> | <u></u> | <u></u> |

SLF SURVEY FORM

NAME OF FACILITY: OUTER LOOP (Louisville) PAGE TWO

TEL. #: 1-502-969-2355

DATED: 8/14/80

PERSON CONTACTED: Robert Lee

POSITION: District Manager

INDUSTRIAL WASTES/MUNICIPAL WASTES BEING RECEIVED (MAY 1 - AUG. 18, 80)

| <u>GENERATOR</u> | <u>WASTE DESCRIPTION</u> | <u>ESTIMATED* VOLUME</u> |
|------------------------------|---|--------------------------|
| 1. <u>Dow Corning Corp.</u> | <u>Scrap cyclics</u> | <u></u> |
| 2. <u>"</u> | <u>Spill residue</u> | <u></u> |
| 3. <u>"</u> | <u>Scrap batteries</u> | <u></u> |
| 4. <u>"</u> | <u>Solvent & Q,1 soaked rags</u> | <u></u> |
| 5. <u>"</u> | <u>Misc. ignitable sludges & gums</u> | <u></u> |
| 6. <u>"</u> | <u>Silicone sealant waste</u> | <u></u> |
| 7. <u>A. J. Bayer</u> | <u>Epoxy powder</u> | <u></u> |
| 8. <u>DMJ, Inc.</u> | <u>Calcium propionate waste</u> | <u></u> |
| 9. <u>Essex Group</u> | <u>Aluminum & chrome hydroxide</u> | <u></u> |
| 10. <u>Ford Motor Co. FV</u> | <u>Paint & lagoon sludge</u> | <u></u> |
| 11. <u>"</u> | <u>Paint sludge</u> | <u></u> |
| 12. <u>Gates Rubber Co.</u> | <u>Carbon black & sludge</u> | <u></u> |
| 13. <u>Inland Chemical</u> | <u>Still bottoms</u> | <u></u> |
| 14. <u>Inmont Corp.</u> | <u>Waste pigments - powder</u> | <u></u> |
| 15. <u>Int. Harvester</u> | <u>Pit & paint sludge (5 types)</u> | <u></u> |

SLF SURVEY FORM

NAME OF FACILITY: OUTER LOOP (Louisville)

TEL. #: 1-502-969-2355

DATED: 8/14/80

PERSON CONTACTED: Robert Lee

POSITION: District Manager

INDUSTRIAL WASTES/MUNICIPAL WASTES BEING RECEIVED (MAY 1 - AUG. 18, 80)

| <u>GENERATOR</u> | <u>WASTE DESCRIPTION</u> | <u>ESTIMATED* VOLUME</u> |
|---|----------------------------------|------------------------------|
| 1. <u>Reynolds Metals</u> | <u>Metal sludge & slurry</u> | <u></u> |
| 2. <u>Rohm & Haas Co.</u> | <u>Cracker Dross</u> | <u></u> |
| 3. <u>Rohm & Haas Co.</u> | <u>KAC pellets & dust</u> | <u></u> |
| 4. <u>Rohm & Haas Co.</u> | <u>Solidified KM polymer</u> | <u></u> |
| 5. <u>Rohm & Haas Co.</u> | <u>Solidified KAC polymer</u> | <u></u> |
| 6. <u>"</u> | <u>Solidified KX polymer</u> | <u></u> |
| 7. <u>"</u> | <u>Solidified emulsion waste</u> | <u></u> |
| 8. <u>Stiglity Corp.</u> | <u>Paint sludge</u> | <u></u> |
| 9. <u>George Whitesides Co.</u> | <u>Organic still residues</u> | <u></u> |
| 10. <u>Allied Drum Service</u> | <u>Misc. drum residue</u> | <u></u> |
| 11. <u>Cardinal Extrusions</u> | <u>Aluminum hydroxide sludge</u> | <u></u> |
| 12. <u>Celanese Polymer Specialties</u> | <u>Solid epoxy resin</u> | <u></u> |
| 13. <u>Chevron, USA</u> | <u>Vinyl toluene enamel</u> | <u></u> |
| 14. <u>Dow Corning Corp.</u> | <u>Polishing residue</u> | <u></u> |
| 15. <u>"</u> | <u>Fuel oil residue</u> | <u></u> |